



## TRIENNIAL REPORT

ON THE

# HOSPITALS AND DISPENSARIES IN BURMA

FOR THE YEARS 1917 TO 1919



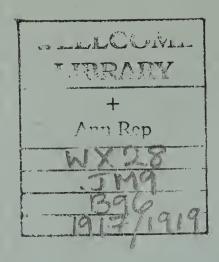


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## [The maximum limit of the body of the Report is fifteen pages.]

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## RESOLUTION

ON THE

# TRIENNIAL REPORT ON HOSPITALS AND DISPENSARIES IN BURMA

## FOR THE YEARS 1917 TO 1919.

Extracts from the Proceedings of the Government of Burma in the General Department,—No. 2X.-9 dated the 19th November 1920.

READ-

Triennial Report on the Hospitals and Dispensaries for the years 1917 to 1919.

- RESOLUTION.—The period under review was one of great difficulty for all departments of Government, and the Medical Department suffered almost more severely than any other from insufficiency of staff. A number of small hospitals and dispensaries had to be closed temporarily, and as new construction was at a standstill, the number of institutions actually declined from 282 to 269. It is, however, satisfactory to note that in spite of this the number of patients treated rose by nearly 200,000, and although there was a slight set-back in the last year of the triennium there is no reason to be disappointed with the result. The Lieutenant-Governor is pleased to see that the proportion of Burmans among the patients, though still unduly small, continues to rise. As the number of trained Burmese medical practitioners increases it is to be hoped that confidence in Western medical science will take firmer root among the people of the country in general. The system of travelling dispensaries, which the Inspector-General of Civil Hospitals advocates, should undoubtedly help to popularize proper treatment among the rural population, and the Local Government will be ready to consider proposals for its extension as the staff which it requires becomes available.
- 2. The Lieutenant-Governor has read with interest Colonel Entrican's remarks on the subject of private charity towards hospitals and of discrimination of patients who can afford to pay for treatment. The whole subject of hospital finance, which now suffers from lack of system in this Province, is under consideration, and it is hoped that the question will be put on a definite basis in the near future, the upkeep of hospitals being divided, in rough proportion to the classes of patients treated, among Provincial and Local Funds, aided by subscriptions from the public. The purposes for which subscriptions could be used have been so strictly limited in the past that there was not much inducement to liberality, but His Honour trusts that when their scope is extended and the question is put more clearly before the public, the amount at present received from this source will be very largely increased. He desires to express his gratitude to those members of the public who have assisted in this respect.
- 3. The importance of Research work, on which Colonel Entrican lays stress, can hardly be overestimated. The Bacteriological Laboratory attached to the Pasteur Institute only came into existence after the beginning of the war, and both this and the Rangoon General Hospital have suffered severely from lack of an adequate staff for nearly the whole of the last six years. Now that most of the medical officers who proceeded on military duty have returned or may, it is reasonable to anticipate, return soon, and new recruits to the higher branches of the service should be once more obtainable, it is legitimate to hope that progress in research may be actively resumed, with valuable results to the health and welfare of the community. The steady increase in the number of patients treated for rabies at the Pasteur Institute shows how necessary it was, and

as the nature of the treatment becomes more widely known, prejudice against it among the ignorant classes will gradually break down.

- 4. The whole question of the reorganization of the Indian Medical Services has not yet been finally settled, but the pay and prospects of some of the junior branches have already been materially improved. A largely increased staff, not only of practitioners, but also of nurses and midwives, is essential for the better management of the hospitals, and in particular to cope with the important subject of maternity and infant welfare in which the country is now lamentably backward. Various proposals are already under consideration, but progress in such a matter as this must necessarily be slow. The number of persons trained annually can only be increased by degrees, and the difficulty of getting candidates for training is considerable. The question is one which is of the greatest importance to the future of the Burmese race, and it is to the educated members of that race that the Lieutenant-Governor looks for support in effecting an improvement in the existing conditions.
- 5. Colonel P. C. H. Strickland, I.M.S., who was in charge of the department during the whole period under review, has now retired from the service. During most of the time he was not in robust health, and His Honour's cordial thanks are due to him for his administration during a time of severe stress. Many of the officers working during that period were doing double, and even treble, duty, and the way in which they performed their duties, with leave overdue and health suffering from overwork, was an example to all public servants. Among these His Honour would like especially to mention the names of Lieutenant-Colonels Barry and Dee. Retired officers came back to work, and others due for retirement stayed on in service. It was only by the exertions of all these officers that a complete breakdown of the medical administration was avoided. Government and the public are much indebted to officers like Lieutenant-Colonels Castor, Warliker, and Kanta Prasad, who have been working as Civil Surgeons during and since the war. Assistant Surgeons and Sub-Assistant Surgeons deserve their full share of praise. That there should have been among them some who were not equal to the higher responsibilities thrust upon them was only to be expected, but the manner in which the majority of them rose to the occasion is deserving of the highest credit.
- 6. Colonel Entrican was only in charge of the medical work of the Province for a few days of the triennium; but he has taken up the duties with the greatest energy, and is also holding temporarily the additional charge of Sanitary Commissioner. He has submitted a most interesting and suggestive report. Those of his suggestions which admit of early practical action should be made the subject of special proposals. The public demand upon the hospitals in Burma is greater than in most parts of India. In-patients are in proportion far more numerous, and there are numbers of Indians and Chinese, who, being strangers in a far country, are ready to avail themselves of medical relief. Hospital buildings are rapidly becoming out of date, and there is hardly a place which does not put up large proposals for enlargements and improvements, and in many cases entirely new buildings. These demands cannot be met simultaneously, and it is important therefore that the programme of new construction should give priority to those places where the need is most urgent. The extent to which private munificence is ready to supplement public funds has also an important bearing on the question.

By order of the Lieutenant-Governor of Burma,

## TRIENNIAL REPORT

ON THE

#### HOSPITALS AND DISPENSARIES IN BURMA

## FOR THE YEARS 1917 to 1919.

1. Introductory Remarks and Administrative Charges of the Department.— The present report covers the period 1917—19. The statistics for the two former years have already been published, those for 1919 are given in the Appendices.

The post of the Inspector-General was held by Colonel P. C. H. Strickland, I.M.S., during the whole of the triennium 1917—19 with the exception of the last fortnight, during which Lieutenant-Colonel J. Entrican, I.M.S., was in charge.

For two out of three years, the general European war was in progress, and when that ended, the hopes of an early return to normal conditions were trustrated by the Afghan and Frontier troubles. The history of the last three years is consequently a continued struggle to keep things going and turn out the usual tale of bricks with a minimum allowance of straw.

2. Number of Hospitals and Dispensaries of all classes opened and Statement closed .- At the close of 1919, there were 269 hospitals and dispensaries of all A. classes working in the province as compared with 282 in 1916. Twenty-one institutions were opened and 34 closed during the triennium, including 12 opened and five closed during 1919. One temporary dispensary at Double Island, for the medical relief of Public Works Department workmen, was opened. Three temporary dispensaries, one at Alguada Reef for workmen, one at Cheduba Island for political detenues, and one for recruits for the Indian Army at Meiktila, were closed.

At the close of 1919, eleven civil hospitals and eight dispensaries remained closed for want of Sub-Assistant Surgeons to staff them. Nine hospitals were working with one Sub-Assistant Surgeon short of their establishment. Fifteen hospitals and dispensaries were held as collateral charges, and six Military Police outposts were in charge of Compounders—total 49.

Three hospitals, Papun, Pyinmana and Tiddim, were held by Assistant Surgeons only, instead of as normally one Assistant and Sub-Assistant Surgeon.

3. Medical Progress and Improvements to Hospitals and Dispensaries .-The progress made in hospital construction has perforce been small and many urgent works have been delayed on account of the war, but some progress has been made. Bricks and tiles are taking the place of wood and matting in hospital construction, and better designed buildings are replacing ancient structures dating from the days when a room of sorts, filled with as many beds as could be conveniently crowded into it, was the only conception of what constituted a hospital. I hope we have now definitely left the "wood" age of hospital construction behind, and have emerged into the "brick and mortar" era. The former served a useful purpose when the latter was impossible, but its day of usefulness is over. Difficult to keep in a sanitary condition, exposed to the ravages of insects, etc., and requiring constant repair, its upkeep was a recurring source of expenditure which ought to be largely eliminated in future.

The period of reconstruction now in progress has, however, dangers which if not guarded against, will mean unnecessary expenditure, loss of efficiency, and disappointment. A definite scheme of reconstruction is required for a large number of hospitals. It is usually impossible for financial and other reasons to rebuild a hospital complete in all details. The work must be undertaken step by step as funds are available, and every addition or partial reconstruction should be made with a view to its eventually fitting into and taking its appropriate place in the scheme as a whole. In too many cases in the past this has been neglected and money has been spent on buildings, excellent in themselves, but which cannot be fitted into, and in some cases even obstruct, a complete scheme of

reconstruction.

The following are the chief additions and improvements to hospitals during the past three years:—

1. A new Municipal Hospital at Toungoo.

2. A new European Ward and Nurses' quarters at Tavoy.

3. A new Civil Hospital at Mawlaik.
4. Extension of the Outdoor Dispensary at Maymyo Civil Hospital.

5. A New Dispensary at Victoria Point.6. A New European Ward and three cottages were added to the Lunatic Asylum

in Rangoon.
7. Work was begun and is in progress for building the female section of the New

7. Work was begun and is in progress for building the female section of the New Lunatic Asylum at Kokine.

8. Quarters for the Civil Surgeon were erected at Mawlaik.

9. Quarters for the Head Compounder, Steward, Compounders and Dressers were built at Akyab.

10. A New Female Ward was constructed at Einme, Myaungmya District.

11. Improvements to the Contagious Diseases Hospital, Rangoon.

12. A New Contagious Diseases Ward at Bogale.

13. New Quarters for Sub-Assistant Surgeons at Prome and Pyinmana.

Also a number of minor alterations and improvements throughout the province.

A large number of building schemes are at present under consideration and the next few years ought to be a period of great activity. New hospitals or important additions to the present buildings are projected in Rangoon, Akyab, Myaungmya, Tavoy, Pegu, Bassein, Maymyo, Myitkyina, Bhamo and Lashio

and this by no means completes the list of requirements.

It would be a great advantage if some comparatively cheap and simple form of hospital construction could be introduced. Dr. Stephens Health Officer, Rangoon, has shown me a design for a hospital ward used on the tea and rubber plantations in Ceylon. This consists of a frame-work of iron on a concrete plinth with single brick walls four or five feet high only. The roof, which may be of tiles or shingles, does not meet the side walls, but is low enough to prevent the rain or sun from beating in. The floor is cambered and cemented with numerous openings in the side walls, so that it can thus be rapidly and efficiently flushed with water and kept clean. I have not yet been able to get an estimate of the cost of this design, but it appears to be eminently suited to those parts of Burma, where anything that can be described as a cold weather is absent.

The general public as well as the Medical Department are greatly indebted to the following gentlemen and corporations who have contributed towards the improvement or added to the amenities of various hospitals throughout the

province.

The President of the Burma Oil Company presented a new ward to the Syriam Hospital. The Burma Oil Company continued to supply water and light free of charge, besides liberal assistance in other directions.

Many firms and individuals have contributed to the upkeep of the Rangoon and Yenangyaung Hospitals. U Po Kyaw built a maternity ward in Ma-ubin at a cost of Rs. 4,154. The Hon'ble Mr. Jamal, C.I.E., contributed Rs. 1,500 to the Allanmyo Hospital and the Sawbwa of Kēngtūng Rs. 2,000 to the Kēngtūng

Civil Hospital, etc.

"Zayats" for accommodation of patients' friends are a necessary adjunct to every hospital in Burma, and one which is usually left to private benevolence to supply. Building a zayat is a work that should appeal to Burmans in a special degree, because it is a time-honoured and well-known form of charity. Yet the number of hospitals either unprovided, or badly provided with these buildings, is large. The names of U Po at Taungup, U Po Chit of Nyaunglebin, Manekjee Palonjee at Myaungmya and Daw Thaw at Dedaye, deserve mention for their generous contributions towards the supply of this much appreciated and very useful form of charity. Thatôn has set a good example to many larger places. A sum of Rs. 6,542 was subscribed for a maternity ward (U Tha Dwe and Mr. Arunachallam Chetty being the largest donors) and Rs. 2,580 by the general public for a "Patients' Comfort Fund."

Private charity has not, however, played as large a part in the past as it might have done, and in some cases even this meagre part has been spoiled by the insistence of the donor on having some separate building to which his name attaches. This has frequently taken the form of a small wooden ward with no provision for its upkeep. Such structures must in the course of time, and usually no very long time, fall into decay and be swept away, leaving nothing

behind to commemorate the generosity of the donor. A subscription towards building a permanent structure, or the endowment of one or more beds in it, to be commemorated by a memorial plate let into the wall, would not only be infinitely more satisfactory from a medical point of view, but would commemorate the

munificience of the donor for generations.

A very large amount of money must be spent annually throughout the province by private individuals on works intended for public use and welfare. In Meiktila alone, which is neither a large or wealthy division, this amounted to nearly three lakhs in 1919. Most of it was expended on kyaungs, a small amount on zayats for wayfarers, in all 312 works; not a single rupee, as far as I know, on hospitals. It seems a pity that some of this wealth could not be diverted into medical channels, but even if it were, the principle of co-operation must be adopted to produce any appreciable result. The individual amounts are too small to be utilized separately for building purposes, but co-operation in agriculture has been successful, so there is no reason to despair of co-operation in charity.

In a few towns "Hospital Day" has been instituted with quite a fair amount of success, notably in Toungoo which collected Rs. 7,846, Moulmein Rs. 3,060, Shwegyin Rs. 967 and Mergui Rs. 600. It is hoped the good example of those

towns will be widely followed.

4. Hospital Equipment.—Most hospitals were fairly equipped with medical and surgical requirements before war broke out, and are still reasonably provided for in that respect, though a good many of the instruments and appliances are somewhat out of date. It is exceptional for instance, to find good modern splints in a hospital and a Harcourt Inhaler for Choloroform is uncommon. This latter is probably the safest form of inhaler, and as chloroform is frequently, of necessity, given by some one who cannot be described as a skilled anaesthetist, the use of a safe method of administering the gas, is most desirable, not only from the patients' point of view but because it relieves the operating surgeon of a great deal of anxiety.

There must be an enormous amount of medical and surgical equipment available in England, due to the demobilization of a large number of war hospitals and it would be an excellent thing if some of this could be procured to improve the

equipment of Indian hospitals.

Bedding and clothing is very deficient in most hospitals. Stocks which gradually become unserviceable could not be replaced, either because they were unobtainable, or because their price was prohibitive. A large sum will be required to bring this portion of hospital equipment up to the necessary standard.

5. A comparison of grand totals of all classes returned as having received Statements medical relief at the hospitals and dispensaries coming under the cognizance of B, D (1) and Government during each year of the triennium under review as compared with the total numbers returned for the preceding triennium is given below :-

Year		In-door.	Out-door.	Total treated.
1917 1918 1919		86,5 <b>6</b> 9 . 9 <b>8</b> ,101 100,693	2,017,498 2,008,146 1,945,936	2,104,06 <b>7</b> 2,106, <b>2</b> 47 2,046,629
Total for 1917—19	•••	. 285,363	5,971,580	6,25 <b>6</b> ,943
Total for 1914-16		249,870	5,809,554	6,059,424
Increase		. 35,493	162,026	197,519

The total treated has shown a satisfactory increase in 1917-19 in spite of adverse circumstances. This increase took place in the early part of the triennium; there has been a falling off in 1919.

The ratio per cent. of total treated to the population was 16.89 for 1919

against 17'39 for 1918 and 17'37 for 1917.

The total number of beds at the end of 1916 was 6,324; 5,134 for males and 1,190 for females. At the end of 1919 the total number of beds had increased to 6,452; 5,247 for males and 1,205 for females—an increase of 128.

## 6. Number of patients treated at State-Public, Local Fund and Private Aided Institutions: --

Year.		In-dcor.	Out-door.	Total.
191 <b>7</b> 1918 1919		69,403 75,793 80,026	1,79 <b>8,12</b> 6 1,776,110 1,727,235	1,867,529 1,851,903 1,807,261
Total for 1917-19		225,222	5,301,471	5,526 <b>,6</b> 93
Total for 1914—16	•••	198,215	5,118,262	5,316,477
Increase		27,007	183,209	210,216

7. In-patients.—The daily number of in-patients, men, women and children,

was 3,524 as compared with 3,079 in 1914—16.

The increase in the female patients was in proportion to the total increase, i.e. about one-fifth of the whole, and took place almost entirely in 1917; since then it has remained practically the same.

The daily average number of beds occupied was 3,524 or 70 per cent. of the accommodation. The total number of beds provided being 5,006 or about one

bed for every 2,400 inhabitants of the country.

The average number of days each patient remained in hospital was 17:16. The death-rate amongst the in-patients rose from 5.7 in 1917 to 7.6 in 1918, but fell to 7.2 in 1919. The influenza epidemic during 1918 which dragged on into 1919 was undoubtedly the cause of this.

While there appears to be a large margin of beds available, in reality a great deal of overcrowding does exist in certain hospitals during the unhealthy season,

as for example Myitkyina, Bhamo, etc.

8. Out-patients.—In 1919, over one million seven hundred thousand attended as out-patients. Malaria, Diseases of the Digestive and Respiratory System, Ulcers, Eye and Skin Diseases, form, as usual, the chief causes for which they

sought relief.

Attendance by proxies rose from 768,293 in 1914—16 to 866,389 in 1917—19. This has not been due to the Influenza epidemic as has been alleged, but has gone on steadily during the last three years. It is to my mind a very unsatisfactory feature, and not likely to help in the removal of the indigenous prejudice against European methods of treatment, especially in a country where it is notoriously difficult to get a correct history of the illness even from the patients themselves. It is on a par with the old custom of treating Purdah women, when the medical

man was expected to prescribe for a patient he was not allowed to see.

.9. Travelling Dispensaries.—It has been unfortunate that all travelling dispensaries have had to be closed down with the exception of one at Paletwa. I think in this way the needs of the rural population can best be met, and future development should be on these lines. A large well staffed and equipped central hospital at Headquarters, with a Travelling Dispensary for each township, having motor ambulance transport, would seem the best solution of the question of how to afford medical aid to the rural population. It appears a sounder method than the multiplication of small hospitals and dispensaries, and the gradual improvement of the roads will make it applicable to most parts of the country.

10. Female Dispensaries.—In all 112,520 patients attended as compared with 112,890 in 1914-16. The Moulmein Dispensary was closed from March 1st, 1919. Two Special Dispensaries for the treatment of Venereal Diseases amongst women, one in Rangoon and one in Maymyo, were opened. The latter has already been closed because it failed to attract patients. As regards the former, the Civil Surgeon, Rangoon East, remarks that if "this dispensary was opened in the hope of diminishing Venereal Diseases in Rangoon, I recommend that it be closed."

The Female Dispensary at Bassein is the only one which has shown an increase during the three years of the triennium. This dispensary practically forms the Female Out-patient Department of the Bassein General Hospital, and is in the same block of buildings as the male out-patients. This seems to be more satisfactory than having the female dispensary as a separate building in another part of the town.

With a view of attracting a larger attendance of the female population and gaining their confidence a good deal of stress has in recent years been laid on the provision of separate male and female waiting-rooms. From a purely administrative point of view in the larger hospitals, this is quite sound, but in the smaller hospitals and dispensaries throughout the country, it is a mistake. unnecessarily complicates the architecture and is disliked by the Burmans. When the latter goes to the hospital he or she is more often than not supported by one or more members of the family, usually of the opposite sex. Separation of the sexes is so alien to Burman ideas that they look on it with suspicion, and I have known patients go away rather than be separated from their friends. Complete privacy in the Consulting, Examining and Dressing Rooms is of course essential, but in the waiting-room, there is no more need for separation of the sexes than there is in the waiting-room of a Harley Street Consultant. What respectable Burmese women really object to is being in the same ward with women of the town, and in most hospitals it is impossible to provide separate accommodation for this class of unfortunates, who furnish so large a proportion of female admissions.

11. Contagious Diseases Hospitals.—There is a crying need for hospitals for Statement B. the segregation of infectious disease throughout the whole province. Generally speaking, the accommodation consists of temporary bamboo sheds often sadly dilapidated, with a nursing staff of coolies who have frequently had little or no training in attendance on the sick. Rangoon, considering its importance and the large number of immigrants from India, is little better off. The Contagious Diseases Hospital has been long recognized as inadequate and the whole question submitted to an exhaustive enquiry by a Committee appointed by Government. The conclusions arrived at have not yet been formulated.

The forlorn condition of these hospitals, and their generally out-of-the-way situation is quite enough to account for their unpopularity—rarely do patients come to them voluntarily. The healthy are prepared to take the risk of continuing to live with the infected, rather than consign the latter to an exile so dreaded. The not surprising result is that infectious cases are concealed and

outbreaks become more dangerous and widespread.

With the exception of small-pox, I think all infectious diseases could be quite safely treated in segregation wards in the compound of a general hospital if proper precautions were taken as regards staff, food, water-supply, disinfection of clothing, etc., and provided plenty of room was available. Even a few sporadic cases of small-pox might be so treated with little risk, though when large numbers are infected, this is not safe. Patients should be much more willing to come to a General Hospital and could be better looked after than in a remote spot where supervision is difficult.

12. Leper Asylums.—The number of inmates remaining at the close of the Statement B. triennium in the four asylums was 845, of which only 23 were pauper lepers, although one knows from personal observation that the number of these unfortunates must run to hundreds, if not thousands, throughout the province. I fear the Lepers Act is a dead letter in most municipalities. The Medical Officer, St. John's Asylum, Mandalay, reports that though cases of infringement of the Act were frequently reported, not a single arrest of a new case was made during the whole of 1919. A large number of pauper lepers wander about the country from

one small bazaar to another and at present it is impossible to stop them. There are indications that this disease is much more widespread than is generally believed. In its early stages, however, it is extremely difficult to detect, but Lieutenant-Colonel Donovan in Madras found that six per cent. of the school children examined by him had signs of leprosy. Lieutenant-Colonel Pearce is of opinion that there is a large amount of this latent leprosy in Rangoon, especially amongst the Chinese community. At the Pasteur Institute treatment by injections of Morrhuate of Soda have been followed by excellent results as regards the relief of symptoms, but in no case has the disease been definitely eradicated. The Medical Officer, St. John's Leper Asylum, Mandalay, reports having obtained good results from the injection of neem oil. The whole subject of leprosy requires full investigation, and I understand that the Sanitary Commissioner has made certain proposals to the Local Government for dealing with this loathsome disease.

3. Dufferin Hospital. - One thousand four hundred and eighty-three patients Statement B. were admitted in 1919, of whom 1,024 were maternity cases, 85 abortions and miscarriages and 374 other cases. Of the maternity cases 833 were reported normal

and 191 or 186 per cent. abnormal, a very high figure, which confirms the opinion I have long entertained that difficult labour is much more common amongst Burmans than amongst European women. I do not know if any series of pelvic measurements have ever been made, but my impression is that these measurements are smaller than amongst European women even after allowing for difference in stature. It is difficult to get figures for comparison, but to take a couple of items—Per cent. of Face Presentations: Europeans 33, Burmese 8; Traverse Presentation: Europeans 5 and Burmese 107. Placenta Praevia is certainly much more common than in Europe, but I cannot give any reliable statistics.

The report gives no information as to the mortality amongst the children or the number of instrumental deliveries. The death-rate was 2.83 per cent. as compared with 3 per cent. last year, but there is no information as to how many

deaths occurred during child-birth.

The out-patients department continues to grow, 15,032 new and 20,989 old cases attended against 13,935 new and 19,881 old last year. I have doubts about the wisdom of this policy of fostering the out-patients department, which is now largely engaged in the treatment of general diseases amongst women and children.

All Dufferin Nurses and Results System Midwives receive their obstetric

training at this hospital.

Statement B.

14. Rangoon General Hospital.—The Rangoon General Hospital has suffered to the same extent as the rest of the province from lack of superior staff. Only three Indian Medical Service Officers have been available during the greater part of the triennium. The Civil Surgeon, Rangoon West, carries out the duties of Ophthalmic Surgeon including Nose, Ear and Throat and X-Ray Departments, and is Superintendent of the Medical School. The Civil Surgeon, Rangoon East, acts as Police Surgeon, while the post of Pathologist is held by the Director, Pasteur Institute, who is also Bacteriologist to the Local Government. The Nursing staff has also been greatly depleted; there are only 53 Nurses on the staff out of a sanctioned strength of 73. Extra Burman and Karen probationers have been recruited and relieve the pressure to some extent, but

the shortage of capable and reliable nurses is greatly felt.

The number of in-patients admitted in 1919 was 8,786 practically the same figure as for 1917 and 1918, the reason simply being that in all three years the available beds were occupied to their full extent, and even more. It is unsatisfactory to note that Burmans formed only between 18 and 19 per cent. of both inand out-patients. It may not be true to say that the hospital exists for the benefit of the Indian cooly, but there would be great deal of truth in the criticism and the question of popularizing the institution amongst Burmans requires attention. The daily average number of in-door patients was 472 in 1919, while the number of beds was nominally only 443. This overcrowding has been continuous during the triennium. One cause for this is the use of the hospital as a "Poor House." Many old chronic cases before which Medical Science is powerless, fill beds which could be put to much better use. An Infirmary ward, either in the hospital compound or elsewhere, is an urgent requirement. The question is under consideration by a committee, but so far no progress has been made towards its solution. Another way in which some relief to the present overcrowding could be obtained is the establishment of a Tubercular Hospital or Sanatorium in some place better suited for the treatment of that disease than the centre of a large town. During 1919 there were 354 admissions with 128 deaths, a larger number than that due to any other disease.

There has been a progressive decline in the number of out-door patients ever since the war broke out; for the triennium 1911—13 they numbered 211,053, for 1914—16 200,567, and for 1917-19 192,862, a total falling off of 18,191 cases. This decline is not of any great significance and will disappear when conditions

resume their normal course.

I do not think enough use has been made of this hospital in the past as a training ground for the Civil Medical Service in Burma. The tendency has been when a man was found efficient and suitable to keep him more or less permanently. This may be excellent for the man and for the hospital, but the question should be looked at from a wider point of view. The hospital is a Provincial Institution and the province has a just claim that its needs should be considered. In no way can the Rangoon Hospital neet provincial claims better than by giving the younger members of the Med cal Service a training and experience which they cannot obtain elsewhere and sending them out into the districts better equipped

for their fight against disease and injury. With the exception of the Superintendent, Civil Surgeons, Specialists and possibly few others, I think no officer should occupy an appointment for more than two years and as far as possible all new arrivals should begin their careers in Pangage

all new arrivals should begin their careers in Rangoon.

In 1919 with a view of associating Private Medical Practitioners with the work of the Hospital, Dr. (Mrs.) Ferguson was appointed Registrar on a salary of Rs. 350 per mensem. The appointment can hardly be said to have fulfilled expectations. Dr. Ferguson has resigned since the close of the year, on leaving Rangoon; and the question of continuing the appointment is still undecided.

15. The following table shows the more important diseases amongst the Statements

in-door patients during the triennium:

Statements C (i) and C

Diseases.				1917. (2)	1918.	1919.	Mean percentage of deaths during the triennium
				(2)	(3)	(4)	(5)
Injuries Malaria	•••	• • •	•••	15,137 11,632	14,475	15,313	3°35 2°68
Syphilis	•	• • •	•••	3, <b>5</b> 35	3,343	3,502	1.81
Dysentery Respiratory disea	 Ises	•••	•••	2,03 <b>0</b> 1,874	<b>2,2</b> 04 2,034	2,74 <b>5</b> 1,949	3.60 3.81
Small-pox		•••		295	308	1,553	21.43
Diarrhoea	•••	•••	•••	1,219	1,274	1,364	19.86
Venereal diseases		• • •		1,362	1,182	1,309	o°48
Tuberculosis-L		• • •		903	888	873	<b>3</b> 6 <b>°</b> 56
Tuberculosis-O	ther		•••	196	264	264	20.72
Cholera '	•••	•••	•••	176	280	819	21.30

Malaria.—This is the commonest cause of sickness, but its incidence varies greatly in different parts of the province. Taking the admissions into the larger hospitals by districts and divisions, which should give a fair idea of the distribution of the malaria, I find that the following is the relative prevalence of the disease expressed in a percentage of the total number of patients treated in different hospitals:—

			Per cent.
Shan States	***	• /	<b>3</b> 3'1 <b>7</b>
Chin Hills	• • •		19'41
Mandalay Division	•••	• •	1 <b>0.</b> 18
Arakan Division	• • •		15.4
Irrawaddy Division		980	11.6
Pegu Division	• • •	• • •	10.1
Sagaing Division	• • •		9'07
Meiktila Division	•••	•••	8.13
Magwe Division	. •••	• • •	5 <b>.0</b> 9

It will be seen that Shan States is the most malarious part of Burma, and Lashio with an admission rate of 44 per cent. is *facile princeps*. Taunggyi and Mogôk come next with 28.03, Mawleik follows with 24.5 and Arakan with 15.4.

Central Burma including the divisions of Sagaing, Meiktila and Magwe have a comparatively small number of admissions, though the figures for Sagaing are spoiled by the inclusion of Mawleik. Magwe, Pakôkku and Myingyan are the least malarious districts.

Holding an intermediate place between these two, come the Lower Burma Divisions, Irrawaddy, Pegu and Tenasserim. While in a class all by itself is Rangoon Town, to judge by the hospital returns, the least malarious place in Burma.

Malaria is not a frequent cause of death; out of 12,026 admissions in 1919 only 355 died, a mortality of 2'95 per cent., but undoubtedly its ravages lower the general health and cause its victims to succumb more readily to attacks of other diseases. In malarial parts of the country quinine is distributed by the district officers. Complaints have been received about the quality of quinine supplied which are being enquired into. I believe that with improved medical education and the more frequent use of the microscope to ensure accurate diagnosis, the amount of malarial fever shown in the returns will gradually decrease. A large number of cases at present called malaria are wrongly so diagnosed, and the disease is probably not so common as generally supposed.

Dysentery.—An analysis similar to that made in the case of malarial fever shows that there is no necessary connection, as is popularly thought, between

these two diseases. In fact those parts of the country which suffer most from Malaria, suffer least from dysentery. The Shan States, Chin Hills, Mandalay and Arakan Divisions show only about one per cent. of admissions for Dysentery, while the Lower Burma Divisions average 2'4 and Rangoon Town heads the list with 4'1.

The central divisions; Sagaing, Meiktila and Magwe, stand midway between the two, having less dysentery than Lower Burma, but more than the Shan States,

etc.

The number of deaths in hospitals from dysentery was 389 or 14.17 per cent. of the admissions and the mortality rate shows a tendency to increase of recent

years.

Cholera.—One thousand two hundred and seventy-five cases of cholera were admitted with a death-rate of 51'29 per cent. during the triennium. More than two-thirds of these cases were in 1919; Akyab, Rangoon and Myaungmya showing the largest number of admissions. The death-rate is heavy, but capable of being considerably reduced by the systematic adoption of Sir Leonard Roger's method of treatment. The Civil Surgeon, Myaungmya, reports nine recoveries out of ten cases treated. The existing conditions for the segregation of infectious disease, before alluded to, militate against the prompt use of the method.

Enteric Fever.—Out of 207 admissions in 1919, 107 were distributed almost equally between Rangoon and Mandalay. The death-rate was high, averaging 25 per cent. The disease is, I believe, extremely common in towns, but rarely recognized by the Burman Sayas. When Civil Surgeon, I have time after time been sent for after perforation had taken place, the case having been treated as

"fever," frequently with abdominal massage.

Influenza.—The returns do not show this disease; it has been entered under various heads, "Other Infectious Diseases," "Pyrexia of uncertain origin" and "Pneumonia," etc., chiefly the first mentioned, which rose from an average of 764 cases for the preceding four years to 7,147 cases in 1918 and 4,064 in 1919, with a death-rate of 21 per cent.

The number of cases of pneumonia increased by 50 per cent. in 1918 and 1919 as compared with previous years. Experience does not clearly indicate any special line of treatment for influenza: Quinine Salycilates, Creasote, Cinnamon

all have their advocates.

Plague.—The number of cases treated in hospital was 1,634, slightly greater than during 1914—16. The death-rate was practically the same, i.e., 60 per cent. Dr. Sheldon, Railway Medical Officer, advocates early and complete excision of the affected glands in bubonic cases, and subsequently packing the wound with pledgets soaked in concentrated saline, to stimulate a flow of lymph. He has obtained good results by this method in a few cases, but the numbers are too small to dogmatize on.

Tuberculosis.—This scourge showed itself chiefly in the form of tubercle of the lung. There were 11,501 in and out-door patients treated in 1917—19 as compared with 9,911 in 1914—16. The increase was considered by some observers to be due to influenza; that tubercle was in fact a common sequela to that disease. The statistics do not bear this out, the number of cases in 1918 and 1919

being fewer than those in 1917.

Other tubercular diseases were little more than one half what they were in 1914—16, being 2,467 cases as compared with 4,535. The extended use of the miscroscope is I believe responsible for this. Tubercle is very much more common in Lower than in Upper Burma with the exception of Mandalay and the Shan States. Amongst the agriculturists in the dry zone of Upper Burma, the disease is almost unknown. The great enemy of attempts to eradicate this disease is the casual way in which it is treated by Burmans in its early stages.

Venereal Diseases.—The statistics do not show the total amount of venereal

disease treated in hospitals.

Syphilis and Gonorrhoea are classified as such, but it is impossible to say what number of venereal diseases are included under the heads of "Inflammation,

Lymph Glands, Other Diseases of the Generative Organs, etc."

The triennium shows a decided increase in both Syphilis and Gonorrhoea, the former from 65,775 to 68,923, and the latter from 49,917 to 53,331, as compared with 1914—16. The cause usually assigned is the return of men from military service, but as a practically proportionate increase occurred in the preceding triennium as compared with 1911—13, this can hardly be accepted as the sole or even the chief cause.

It is difficult to say whether the increase in admissions for venereal disease, indicates a real or only an apparent increase in its incidence. The numbers coming to hospitals have increased largely, but this may mean greater confidence

in European methods of treatment especially as regards Syphilis.

Anchylostomiasis is very prevalent in the Arakan Division. In the Akyab Jail 27 per cent. and at the Civil Hospital 24 per cent. of those examined, and who showed no obvious symptoms, were found infected. It is only at an advanced stage of the disease that patients seek relief in hospitals. Throughout the remainder of Burma, the disease is much rarer, but its incidence has never been properly investigated and many cases returned as Anaemia, etc., are really cases of Anchylostomiasis. Investigations in India showed that latrine users were almost free from this disease, a strong argument in favour of an efficient conservancy

system in every town.

Small-pox and Vaccinal Condition.—In 1919 the admission rate rose to about five times what it was in the previous two years. Rangoon Town furnished 72 per cent. of all cases and 76 per cent. of all deaths. The majority of these were either imported or arose from contact with imported cases. Rangoon is in fact the chief distributing centre for small-pox in this province, and until effective means are taken in the form of vaccination and re-vaccination of all arrivals from India, it will continue to distribute this loathsome disease. A great deal might be done by bringing the legal definition of a "protected person" in the Vaccination Act into line with the present scientific conception of what constitutes a "protected" person. At one time, no doubt the two ideas were more or less identical, but since then they have diverged greatly. It is now recognised that the immunity conferred is a limited one, it does not last throughout life, and an adult vaccinated in childhood only, is in reality an "unprotected" person.

The advantages of vaccination are clearly brought out by a study of the

statistics of patients admitted for small-pox in 1919.

Out of 1,553 cases, 380 or 24'4 per cent. died, but the death rate amongst the vaccinated was 15 per cent. while amongst the unvaccinated it was 36 per cent. The vaccinated class includes all doubtful cases, where the patients stated that he or she had been vaccinated, but no marks could be found. Practically all the vaccinated adults who contracted small-pox had been vaccinated once only in infancy, and this, though it reduces the incidence and death rate of the disease, is not sufficient to confer complete immunity from either.

will find a ripe field awaiting them. There is an enormous amount of material at hand, which would richly repay investigation not only in respect of well known common diseases, but of rarer and sometimes even wholly unrecognized morbid

conditions.

For instance, a disease called by the Burmans "Athama" was described by the Civil Surgeon, Toungoo, in 1898, and his observations were confirmed by the Civil Surgeons of Pakôkku, Shwebo and Myingyan. The characteristic feature of the disease was a malignant sore, followed by septic fever and in many cases death. In 1905 and 1906, the Civil Surgeon, Meiktila, described a similar condition said to be due to the bite of a poisonous spider and called by the Burmans "Pengoo Na." There is no doubt all these officers have described the same disease which is widespread in distribution and very fatal in character.

A disease known as the "Hton Yawga" has been described by Civil and Medical Officers in Bhamo District, most prevalent during the rains, bearing some

resemblance to Beri-beri and with a death rate of 50 per cent. or over.

A somewhat similar disease known as "Hton Swai" has caused a heavy mortality in the Upper Chindwin. A number of blood slides taken from patients suffering from this disease were examined by Lieutenant-Colonel Pearce. Malarial parasites were not found, but marked eosmophilia was present in all. Lieutenant-Colonel Pearce hazards the suggestion that the disease may be Anchylostomiasis or Bilharziosis.

A disease called "Mak Hkaolam" by the Shans is said to be very prevalent in some parts of the Southern Shan States, causing heavy mortality, and characterized by a curious peri-anal eruption. The Civil Surgeon, Taunggyi, thinks it may be due to a parasite, Schistosoma Mansonii, but nothing definite

has been proved.

These few instances show the need of scientific investigation carried out by specialists.

Statements
D (i) and
D (ii).

17. Military Police Hospitals.—The strength, sickness and mortality of the Burma Military Police during the triennium under review and that of 1914—16 are compared below:—

Details.	1917.	1918.	1919.	1917—19.	1914—16.
Average strength  Admissions per 1,000 of strength  Daily average sick per 1,000 strength  Deaths per 1,000 strength  Invaliding per 1,000 strength	16,166	16,354	16,048	16,189	16,078
	1270°26	1476*5	1390°74	1379'17	933'19
	51°88	58*38	54°52	54'93	51'67
	7°14	20*55	15°31	14'33	7'24
	16°02	15*00	26°19	19'07	16'58

The number of admissions have greatly increased during the triennium. Various causes have brought this about. The Influenza Epidemic of 1918, the Chin Hills operations, the retention on account of the war of a large number of old and sickly men for light duty, men who in the ordinary course of events would have gone on pension or been invalided. For the same reason invaliding increased greatly after the termination of the war, but there is still too large a proportion of worn out men in the ranks.

Out of the 18,915 in-patients treated, practically one half suffered from malarial fever with a death rate of '42 per cent. This compares very favourably with the civilian death rate of 2.68 per cent. and shows what can be done by prophylactic measures and early treatment, for the police, as a body, are much more exposed to infection than the civilian population, and serve chiefly in the most malarious parts of Burma, Mandalay Division, Shan States and Chin Hills.

Quinine is issued prophylactically to the men in all malarious tracts, and the use of mosquito curtains encouraged as much as possible. The latter should be

part of the Military Police Sepoy's permanent equipment.

Statements D (i) and D (ii).

Statement

Statement

18. Railway Hospitals and Dispensaries.—There were 28 railway institutions at the beginning of the triennium under review, but only 26 remain at its close, one at Mahlaing and the other at Yinmabin, both in Meiktila District were closed during 1917 and 1918 respectively. During the year 1919, a new dispensary with subsidiary buildings was commenced at Kalaw and is approaching completion.

The total number of patients treated at those institutions was 109,506 in 1919 as against 119,815 in 1918. Thus there was a decrease of 10,309 patients which is accounted for by the Chief Medical Officer, Burma Railways, by the disappearance of Influenza in epidemic form and to a marked decrease in the

number of cases of malaria treated.

The in-door accommodation remained the same as in the previous triennium, i.e. 88 beds for males and 4 for females. One thousand one hundred and fifty-two cases were treated as in-door patients as against 1,373 in 1918. Injuries (general and local) contributed 3.6 cases, Malaria 156, All Other Infectious Diseases 74, Dysentery 64 and Pneumonia 52. There were 81 deaths, or 7.03 per cent. of admitted cases.

19. Private Non-aided Dispensaries.—There are at present no non-aided

dispensaries in Burma as far as is known.

20. Class.—The percentage of different classes of patients treated during 1917-19 as compared with 1914-16 is given below:—

	)	-
Race.	1917-19.	1914-16.
Europeans Burmese Hindus Mahomedans Other classes	1°91 58°24 17°41 12°15 10°29	2°13 54°0 17°27 12°17 14'5

The only noticeable difference is that the Burmese have increased by about a per cent. and the "Other Classes," decreased by the same figure. This is due to difference in classification and has no real significance. Various tribes, such as Karens, Kachins, Chins, Taungthus, Shans, etc., formerly called "Other Classes," are now included under the general head of "Burmese." This change has not, however, been in force throughout the whole triennium, so that a further fall amongst "Other Classes" must be expected.

The Burmese who form about 90 per cent. of the population furnished only about 60 per cent. of the hospital attendance. This is an unsatisfactory state of affairs, but is explained to some extent by the fact that most of the Indians in the Province are town dwellers, and it is from the towns that the bulk of those attending hospitals is drawn. At the same time it is useless disguising the fact that Burmans as a race prefer their own time honoured methods of treatment, and are as yet far from being convinced of the superiority of Western Medical Science. Time alone will bring about a change in their attitude.

Sex.—The following is the summary of attendance for three years:—

Year.			Males,	Females.	Child	Total.		
					Males.	Females.	z otas.	
1917 1918	* * *		1,034,999	380 <b>,28</b> 4 <b>3</b> 73,899	250,466 241,057	201,780 194,643	1,867, <b>529</b> 1,851,9 <b>03</b>	
1919	***		1,030,237	«362,48 <b>7</b>	227,459	187,078	1,807,261	
To To	otal, 1917—19 otal, 1914—16	•••	3,107,540 3,049,563	1,116,670	718,982 672,866	583,501 542,1 <b>5</b> 0	5,526,693 5,306,607	

The number of females including female children was 30'7 per cent. of the total attendance, an increase as compared with 1914-16 when the figure was 29.8.

21. Operations.—The total number of operations performed during the Statement triennium was 160,886 as compared with 154,391 in 1914—16. This represents G. about 3 per cent. of the cases treated and falls below the Indian standard. Generally speaking the Burman has a greater dread of operation than the Indian.

The following table gives the number of important operations as compared with the triennium 1914—16, and as will be seen, there has been a slight falling off:

Name of Operation.		1917.	1918.	1919.	Total.		
						1917-19.	1914-16
Amputations Frephinning the skull	•••	•••	293	358 118	332	983 379	866
aparotomy	•••		99	108	117	328	312
Cataract extraction	***		30	28	65	124	314
ridectomy	400		17	6	26	49	333
Excision of eyeball			27	23	46	96	74
dernia strangulation	• • •	•••	45	47	53	145	178
dernia radical cure	٥٥,	***	235	176	204	605	552
Abscess of liver		•••	33	39	49	130	124
ithotrity	000	000	6	6	5	. 17	44
ithotomy	•••	•••	45	33 3	51	129	104
Litholaplaxy	•••	•••	5	3	. 2	10	.24
Ovariotomy	•••	•••	32	3 <sup>2</sup>	42	106	129
Hysterectomy Excision of vermiform	ompondis.		53 79	53 28	53 22	159	109

The largest amount of operative work was carried out in the Rangoon General Hospital, but Mandalay and Akyab showed an equally high standard, both as regards quantity and quality. The death-rate for in-patients was 2'2 as Compared with 2'4 during 1914—16.

There has been a very heavy fall in cataract extraction and Iridectomy and to a less extent in operations for stone and appendicitis. On the other hand,

operations on the skull and amputations have increased.

I can give no explanation of the surprising fall in the number of eye operations, beyond the fact that the Ophthalmic Surgeon in Rangoon had many other duties to perform, which greatly restricted the time he could devote to eye work.

Three thousand four hundred and fifty-hree intravenous injections of Salvarsan were given, the numbers each year being practically double those of the preceding year, but the number of cases "cured," 82 per cent, as shown by the returns, is, I fear a very optimistic estimate.

22. The hospitals and dispensaries, excluding those belonging to the rail- Statements way throughout the Province, are financed by the Provincial Government and H. and J. Local Funds, supplemented in a comparatively small degree by private charity.

The following table gives an abstract of the income and expenditure on hospitals and dispensaries during the three years under review:—

Details.		19	17.	1918.	1919.
Income.		F	is.	Rs.	Rs.
Cash balance			85,003	75,062	70,363
Contributions from Gover Contributions from Local			95,485	9,57,965	10,64,778
			02,491	9,38,195	9,33,745
Interest on investments Subscriptions	•••	•••	2 <b>,</b> 987 56,686	3,362	3,077
D	***			56,541 <b>8</b> ,483	73,801 2,630
Miscellaneous receipts	•••	•••	3,075	52,059	62,812
'Tota	al Receipts	20 8	34,944	20,91,667	32,11,206
Expenditu	re				
Establishment	• • •	9,	73,939	9,69,754	9,81,389
Europe medic ne	•••	2,	11,715	2,44,182	2,00,688
Bazaar medicine	•••		<b>15,884</b>	68,453	71,732
Diet	•••		53.287	2,55,363	2,99,80 <b>8</b>
Miscellaneous charges	•••		11,531	2,34,362	2,79,960
Buildings and repairs	•••		85,325	2,39,517	<b>2,</b> 86 <b>,</b> 896
Investments	•••	•••	18,166	6,596	1,773
Total E	xpenditure	20,0	9,847	0,18,227	21,22,245
Closin	ng Balance		75,097	73,440	88 <b>,9</b> 61
GRA	ND TOTAL	20,	84,944	20,91,667	22,11,206

A modern hospital is an increasingly expensive necessity, entailing an expenditure far beyond the resources of most of the Municipalites or Town Committees. I do not think an estimate of Rs. 1,000 per bed per annum, for all purposes, would leave any considerable balance if the hospital is to be properly equipped, staffed and kept up to date. Few, if any, of our local bodies are in a position to meet such an expenditure or even one half of it, and in consequence many of the hospitals lead a starved and crippled existence, the actual expenditure per occupied bed being less than Rs. 600 a year.

There should be at least one good modern hospital in every district, but the

Municipalities even when aided by the district fund cannot finance it.

In some cases the district fund might increase its subsidy, because patients coming from the district, outside municipal limits, sometimes reach 60 per cent. of the total, and rarely fall below 20 per cent. whereas the district contribution generally forms a smaller percentage of the expenditure. A special hospital tax levied only on assessments above a certain value might be feasible in Municipalities and Town Fund areas. This would fall only on the well-to-do, who, with a few exceptions, do not contribute in any substantial degree towards the upkeep of hospitals, although quite willing to make use of them.

increased during the triennium forming 50°17 per cent. of total expenditure during 1919 as compared with 44 55 per cent. in 1917. Local contributions, on the other hand, fell from 49°88 per cent. in 1917 to 44 per cent. in 1919. Subscriptions and miscellaneous receipts have risen somewhat throughout the whole province.

24. Expenditure.—The increases under the heads of bazaar medicines, diet and miscellaneous charges have been due to the steady upward tendency of prices. Hospitals have been hard put to it to make ends meet and the close of the triennium found them with stocks depleted beyond the point of safety. Expenditure on Europe medicines varies, depending a great deal on when the Accounts Department happens to make the necessary debit, it rarely corresponds

with the actual expenditure.

Officers, there remained 11 only during the greater part of the triennium, the number rising to 13 in 1919. Their places were taken by retired Indian Medical Service Officers, private practitioners, and Civil Assistant Surgeons and the machine continued to work, though with a certain amount of creaking, and loss of power. Still it did work, though those who took the strain suffered. Lieutenant Colonels Barry and Dee, who carried on in Rangoon throughout the war have, since its close, been obliged to go on sick leave, and others, still working, are

tired men. A calculation made of the amount of furlough taken by Indian Medical Service Officers in civil employment in Burma at the close of the year showed that the average amount of furlough taken was one year in 13½ years' service, and the privilege leave about one-fourth of what was earned.

Normally the 42 Civil Surgeoncies in Burma are held by 19 Indian Medical Service Officers, 7 Uncovenated Medical Officers, 12 by Military Assistant Surgeons and 4 by Civil Assistant Surgeons. At the close of 1919 the

distribution was as follows:-

Held by Indian Medical Service Officers, 7; by Indian Medical Service Officers (retired) 2; as collateral charges by Indian Medical Service Officers in military employment 2; Private Practitioners 1; Uncovenanted Medical Officers 6; Military Assistant Surgeons 4 (one a retired man) and Civil Assistant Surgeons 19.

The department has suffered from an administrative and professional point of view from the lack of superior officers. The work has been kept going in a very creditable way, but under surface there has been a good deal of stagnation.

Military Assistant Surgeons.—Out of 19 on the rolls only 3 Military Assistant Surgeons remained in the Province at the beginning of 1917, the number fell to one in 1918 and rose to 4 at the close of 1919, the remainder are still on military duty. The absence of those men has been a great loss to the Province.

Civil Assistant Surgeons.—There were 51 permanent and 16 temporary officers of this class at the beginning of 1917. The latter have been gradually increased until they now number 26, including three Sub-Assistant Surgeons who have been promoted. One man was lost from the permanent strength by resignation in 1918, so that the year ended with a total of 76. Of which 56 were actually on duty in Burma, the remainder being on leave or military duty.

Eight Civil Assistant Surgeons left the Province for military duty in 1917

and one in 1918, while one returned in 1919.

This branch of the Medical Department is the only one that can be said to have benefited by war conditions. A large number of its members have occupied positions which in the ordinary course of events, they would never have attained, and have on the whole carried on their duties creditably, a few of them extremely well, but not generally speaking in such a manner as to warrant the extravagant claims put forward on their behalf, while, in a few cases, an unpleasant impression has been created by their devotion to the pecuniary aspect of their professional ministrations.

It is also quite time, some of the members of this branch of the service realized, that private convenience must sometimes give way to public necessity.

Sub-Assistant Surgeons.—The number of Sub-Assistant Surgeons on the rolls at the beginning of the triennium was 360 out of a sanctioned strength of 381 of whom 314 were serving in Burma. At the end of 1917 the number on the rolls had risen to 396 of whom 277 were in Burma. At the end of 1918, there were 408 on the rolls and 299 in Burma.

Twenty-three men reverted from Military duty chiefly during 1919 and the close of the year finds us with 299 men in Burma of whom 6 are temporary, 75 on

Military duty and 34 on furlough or sick leave.

This branch of the Medical Department has "carried on" under grave disadvantages during the triennium. Extra work, want of leave, and the general rise in cost of living, have all combined to create a spirit of depression and discontent in many of its members. The service is tired out and wants a rest. It is no easy matter to retain keeness and energy, through years of continuous work, often in uncongenial and unhealthy surroundings, but, on the whole, the service has risen to the occasion. The coming triennium will I hope see the complete re-establishment of normal conditions.

A new scale of pay was announced at the close of 1919, though it has not yet come into force owing to difficulties with the Accounts Department. This new rate substitutes a time scale for the former graded pay. Sub-Assistant Surgeons will in future start at Rs. 75 rising gradually by bi-annual increments of Rs. 5 for the first 18 years, and Rs. 10 for the next 6 years, to a maximum of Rs. 156. All further promotions will be by selection to two senior grades carrying pay of Rs. 175 and Rs. 200 respectively. These selected Sub-Assistant Surgeons will number 10 per cent. of the cadre. This new scale gives a substantial increase to both juniors and seniors but benefits the intermediate men to much less extent.

Generally speaking the work of this class has been good, though there have been some inexcusable instances of incompetence and neglect, especially in Medico-legal work. The training in this important branch requires more

attention, and will I hope be improved in the future.

At the same time it cannot be denied that professional efficiency and general education have greatly increased during recent years. Sub-Assistant Surgeons who cannot write readable and intelligible English, are now as rare as they were common twenty years ago. The weakest point in their equipment at present is lack of discipline, some members of the service seem to have no conception

of the meaning of the word.

It is a severe test to be placed in charge of a small isolated hospital for several years with no chance of meeting men of their profession or seeing another man's work. Yet most Sub-Assistant Surgeons retain their professional keenness and industry in a very creditable degree. I take the liberty of suggesting that the time has come for altering the rules enjoining Civil Surgeons to, themselves, write the Annual Reports of Hospitals and Dispensaries in charge of Sub-Assistant Surgeons. When originally promulgated the general education of Sub-Assistant Surgeons was so poor that very few of them could have written an intelligible report, hence the necessity of the order. But a different state of education exists now, and almost every Sub-Assistant Surgeon is capable of writing quite a good report on his year's work, and doing so would have both a stimulating and educative influence. The Civil Surgeon after adding his remarks or criticism should pass it on to the Inspector-General of Civil Hospitals who would thus gain a valuable clue to the Sub-Assistant Surgeon's value and mental capacity. No doubt some quaint expressions and still quainter views would be found in these reports, but they would tend to increase the man's pride in his work and make him think, and weigh evidence, on professional matters.

and are employed in mofussil hospitals as substitutes for trained nurses. The reports about their usefulness are conflicting—my own experience has been good, but a large number of Medical Officers consider that they are merely overpaid Ward servants and of little value. As a class they are not likely to be permanent and will no doubt gradually be replaced by properly trained nurses, but in the meantime they fill with more or less success, the gap between the ward servant

and the Medical Officer.

27. Nursing.—Most of the nurses in the Province receive their training at the General Hospital, Rangoon. There are two classes, Europeans and Anglo-Indians, and those drawn from the indigenous races chiefly Burmans and Karens.

The first mentioned class goes through a three years' training, but of late, great difficulty has been experienced in obtaining suitable candidates. The pay and prospects are insufficient to attract girls with the necessary physique and intelligence, and the shortage has made it necessary to fill the vacancies with Burman and Karen Nurses.

The latter class of which there are at present twenty under training, work for two years only. I agree with the Superintendent, General Hospital, in thinking that this is not sufficient. Many of these girls take posts in the smaller hospitals throughout the country and I have had painful personal experience of their deficiencies. They have no knowledge of "Theatre" work, which, in a small hospital, is their most important duty. The training should be extended for another year and made more complete than at present. A few Burman nurses are trained at Mandalay, and Hospitals like Moulmein, Akyab, Maymyo and and Toungoo should all be utilized for training, in fact I think a girl has a better chance of a good all-round training in a small than in a large hospital, for she can receive more individual attention, provided of course there is a competent matron.

In addition to the above, the Dufferin Nurses, twenty in number, receive their training for two years in sick-nursing at the General Hospital, afterwards going

through their obstetric training for one year at the Dufferin Hospital.

Backward as the Province is in nursing arrangements as compared with the western countries, I believe in this respect we are ahead of most other Provinces in the Indian Empire. Registration of Nurses should be introduced both for the protection of the public and of the nurses themselves.

28. Results System Midwives.—Eight Results System Midwives have been trained during the year, making a total of 23 for the triennium. There are now

75 scattered throughout the Province.

These women are trained at the expense of the Local Government but the latter has apparently no hold on them, and they are at liberty to resign at any time. Before training, I think, the candidates should be compelled to sign a bond to continue in the employment of the local body to which they are posted on completion of their training for three years. The reason for leaving is simply that the midwife can make more money by private practice. This may right itself in time, as the supply overtakes the demand, but at present the temptation to better themselves proves too strong for many of them.

But while the arrangements of the towns are being gradually met, nothing has been done for the rural population, nor do I think anything can be done on the present lines. The women who qualify as Results System Midwives or Dufferin Nurses will not live in rural tracts, the life does not appeal to them and they can earn higher wages in the towns. An experimental scheme has been submitted to the Local Government for the training of "Village" Midwives.

29. Lady Minto Nursing Association.—The total number of cases attended during the triennium was 241 as compared with 200 in 1914—16. During the last three years 103 cases were refused, no nurse being available. About one-third of the total number attended were maternity cases.

The Secretary states "since 1916 the number of subscribers has considerably decreased and as a business concern, the Association is not self-supporting in

Burma."

It will be a pity if this very useful Association has to suspend work, through

lack of public support.

30. Pasteur Institute.— The number of patients attending shows a steady increase year by year, 313 in 1917, 379 in 1918 and 462 in 1919. The patients came from 90 different stations and during the whole period only 4, or 35 per cent. of treated cases died.

Information with regard to the Institute and the Railway and Steamer concessions to those attended it, have been circulated throughout the Post Offices

of the Province.

Rangoon furnished 279 patients out of a total of 462, but the remaining cases have been fairly evenly distributed over the whole Province, except the Arakan Division, from which no cases came, possibly they find it more convenient to go to India.

Associated with the Pasteur Institute in the same building is the Bacteri-

ological Laboratory, the Director being also Bacteriologist to Government.

I do not think the public generally realise what a large amount of unobstrusive hard work is done here, with a staff very weak numerically as compared with similar institutions in India. One thousand two hundred and ninety-seven cases were examined during the last year, many of them involving long complicated processes of investigation. The staff has been strengthened since the close of the year by the appointment of an Assistant Director, but this is only a fraction of what is required.

Medical Research, one of the most important functions of the Institution, has perforce been in abeyance ever since its foundation. Future developments should find their base of operations here, and, rightly directed, the institution has a magnificent future, when the many medical puzzles of this Province, presenting problems second to none in interest and value, can be attacked with adequate resources. But I sometimes think the present Director must feel rather like Moses, who looked on the Promised Land from afar, but was never allowed to

enter if

31. Burma Medical Council.—Colonel Strickland vacated the office of President on leaving the Province and was succeeded by Lieutenant-Colonel I. Entrican.

Six meetings of the Council and 16 of the Executive Committee were held during the triennium. One hundred and thirty-nine names were added to the

Register making a total of 645 Registered Medical Practitioners.

People who scorn the idea that they are objects of charity, have yet no qualms about demanding free medical attendance at institutions intended only for the poor and needy, and by so doing place the unfortunate Medical Officer in a very invidious position. Except the patient is personally known to him, it is often impossible to tell whether he or she is in a position to pay, and advantage is taken of this by many who should be above such petty meanness. A donation box in the

consulting room with a prominent notice to the effect that all not entitled to charity must subscribe the usual fee to the hospital funds, appear to be the best way of dealing with this class of patients. The discrimination scheme under which patients who can well afford to pay professional as well as hospital fees, are charged a reasonable amount, one-half of which goes to the hospital funds and one-half to the officer concerned, has now been in force for several years and the reports are all favourable. At present it has been applied to Rangoon, Mandalay and Maymyo only, but should, I think, be extended to Moulmein, Bassein, Akyab and Toungoo.

In Rangoon Rs. 21,269 were credited to Government during 1919 from this

source, and 407 private patients came under its working.

33. Inspections.—The number of institutions inspected by Civil Surgeons was much the same as in the previous triennium averaging 123 per annum, but many of these were inspected several times and the total number of inspection in 1919 was 258. This is a low figure and should be improved on.

During the triennium Colonel Strickland inspected Moulmein, Thatôn, Mogôk, Thabeitkyin, Shwebo, Myitkyina, Maymyo, Prome, Paungdè, Gyobingauk, Tharrawaddy, Pegu, Toungoo, Yamèthin, Pyinmana, Meiktila, Kyauksè, Mergui,

Victoria Point and Akyab.

Colonel Strickland before leaving expressed his satisfaction at the manner in which his office staff had performed their duties. During the difficult times of the last three years Mr. Seppings' knowledge and experience were particularly valuable.

J. ENTRICAN, M.A., M.D., D.P.H., Lieut.-Col., I.M.S., Inspector-General of Civil Hospitals, Burma.

#### STATEMENT A

Showing the number of Hospitals and Dispensaries in Burma during the year 1919 (Paragraph 2).

Population of the Province, 12,115,217.

Class of dispensary.	Number open on 31st December 1918.	Number opened during the year.	Number closed during the year.	Number open on the last day of the year.	Remarks.
	(2)	(3)	(+)	(5)	(0)
I.—State-Public	76	7(a)	1(b)	82	(a) (1) C. H., Wundwin in Meiktila District; (2) C. H., Sale in Magwe District; (3) C.H., Nammawngun in Southern Shan States; (4) C. D., Kindat, Upper Chindwin District; (5) C. H., Kanbalu in Shwebo District; (6) Travelling Dispensary, Palet-
II.—State-Special					wa in Arakan Hill Tracts and (7) C. H. Pinlebu in Katha District.
(i) Police	41	• • •	• • •	41	(b) Female Dispensary, Moulmein, Amherst Dis-
(ii) Forests and Surveys	2	1(c)	2(d)	I	trict. (c) Special Burma Forest Survey Party Dispensary, Banmauk, Katha District.
(iii) Canals	2	••	• • •	2	(d) (1) Upper Tenasserim Valley Dispensary and (2)
(iv) Others	3	1(e)	I(f)	3	Upper Tavoy Valley. (c) Double Island Dispensary in Amherst District.
III.—Local Fund	95	3(g)	I(h)	97	(f) Alguada Reef in Bassein District.
IV.—Private-aided	17	***	•••	17	(g) (1) C. H., Monyo in
V.—Private non-aided		•••	•••	• • •	Tharrawaddy District; (2) C. H., Kawa in Pegu Dis-
VI.—Railways	26	b. 0		26	trict and (3) C. H., Lewe in Yamethin District. (h) C. H., Rathedaung in
Total	263	12	5	269	Akyab District.

Classes I and II.—These include all institutions maintained by Provincial Funds and under Government management. The fact that an institution possesses endowments or receives contributions from Local Funds or private subscriptions should not be regarded as a reason for not classing it as "State," so long as Provincial and Imperial Funds are practically responsible for all the charges connected with it. Class I—"Public" are State dispensaries which are open to the poorer classes of the public. Class II are "State" dispensaries which serve only a special section of the public as indicated in the sub-classification attached.

Class III.—Local Fund dispensaries include all institutions which are vested in local boards or Municipalities or guaranteed or maintained by Local or Municipal Funds. The fact that such an institution is aided by private subscriptions, or receives assistance from Government in the shape of part of the salary of the Medical Officer, grants of medicine, or otherwise, should not be regarded as a reason for not classing it as a Local Fund dispensary so long as its existence is practically dependent upon Local Funds.

Local Fund dispensary so long as its existence is practically dependent upon Local Funds.

CLASS IV.—Comprises institutions supported by private subscriptions or guaranteed, but receiving aid

from Government or Local Funds.

CLASS V.—Comprises institutions maintained entirely at the cost of private individuals or associations. The fact that Government supplies superior inspection or registers should not be regarded as a reason for not treating it as a private non-aided dispensary.

CLASS VI. - Comprises all railway dispensaries whether maintained by State railways or others.

#### NOTES.

- 1. Transfers of dispensaries from one class to another should be noted in the column of "Remarks."
- 3. Hospitals of the different Funds should be shown as private-aided or non-aided, as the case may be.
- 3. Dispensaries of a purely itinerant character should in no case be included in the statement.

Showing the number of in-door and out-door patients treated in the State-Public, Local Fund and

th, and												In-do	or pa	tients.				
		1 d 650		Total	treated	during	- <del></del>	year.	d.	red.			eated.	Num of b	eds	Dail avera	ge	
District.	Name of Dispens	sary.	class.			Childr	en.		cured.	relieved.	ged e.		of total treat	avail		numb		umber.
			what	Men.	omen.	Male.	Female.	Total.	umber	Number	Discharged otherwise.	Died.	Ratio of cent. of to	en.	Women.	Men.	Women.	Serial N
(1)	(2)		Ğ (3)	∑ (4)		(6)	(7)	(8)	$\tilde{Z}$ (9)	Ž (10)	(II)	(12)	Experience (Secondary)	∑ (14)		(16)	<b>≯</b> (17)	Se
	CLASS A GEN DISPENSARI																	
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H.T. N. Arakan.	Paletwa Paletwa/ Iting Dispensary.	erant	I	103	21	19	6.	149	125	9	4	3	2	18	6	4	1	9
KYAUKPYU		* * * *	III	169 5 <sup>2</sup>	2 <b>8</b> 6	5 2	4	206	137 53	54 I	3	3 4		16	4 1	6 2		11
SANDOWAY	Sandoway Taung up Gwa	•••	III III III	289 74 51	32 5 2	3	7	33 <sup>2</sup> 82 53	249 01 47	52 8 2	5	4	3 5	12 4 4	2 2 2	3 2	2	12
Rangoen Town.	Genl. Hospl., l. C. D. Hospl., Plague Hospl., Pzg. Male Disp Kemmendine Leper Asylum,	Rgn. , Rgn. py	I I I I IV	6,801 5,688 2,050	1,568 319 70  38	121		8,786 6,224 2,160 	4,929 1,838 192	1,593	922 3,519 1,753	873 834 205 	9	343 240 48 	30 16  30	363 101 19 	81 13 1  38	1; 1; 1; 1; 2;
HANTHA- WADDY.		• • •	III III III III	205 190 249 824 178	24 19 41 135 25	5 1 1 16 7	1 4 11 2	234 211 295 986 212	202 151 270 607 185	2 41 8 238 13	14 7 5 14	4 4 9 91 13	3 9	12 6 16 22	4 2 2 8 2	9 7 8 31 6	1 1 4	2 2 2 2
Insein	Taikkyi Hlègu	•••	III	242 192	24 27	4	4 3	274 222	194	38 15	19	16	3	16	4 2	8 6	I	2 2
PEGU	Pegu Nyaunglebin Kawa Kyauktaga Zaungtu	•••	III III III III I I	903 525 96 282	92 20 43	13 11 3 10	6 7 7 4	1,039 035 119 339	794 509 100 253	111 44 5 3 <sup>2</sup>	21 ,9 	87 47 5 20	7 4	30 22 11 18	6 4 3 4	28 18 4 9	4 3 1 1	2 3 3 3
THARRA- WADDY.	Tharrawaddy Mônyo Thônzè Gyobingauk Zigôn Letpadan Tapun Minhla	•••		430 22 72 371 369 422  253	121 3 8 62 46 68 	7 2  23 2 7  3	8 9 5 7	566 27 82 465 422 504 	476 18 76 311 366 407 	37 4  98 5 51  42	5 1 20 11 5	23 18 25	4 5 4 5	37 6 3 18 16 20	2	20 I 3 14 16 16	7 1 2 2 2 2 1	3 3 3 3 3 4
Prome	Prome Paungdè Shwedaung Paukkaung	• • •	HII	838 448 153	185 50 25	5 10 3	7 4 3	1,035	79 <sup>2</sup> 343 15 <sup>2</sup>	58 56 14	63 71 6	87 28 5	5	30	8 4 8	35 15 5	S 2 1	4 4 4
MA-UBIN	Ma-ubin Yandoon Pantanaw Danubyu	* * * · · · · · · · · · · · · · · · · ·	III III III	467 278 227 178	60 12 48 17	13	8 7	548 290 294 197	420 179 279 151	27 64  18	45 6 4	40 31 6	1 3	36 18 7 8	6 6 3 4	8 6 7	2  I I	4 4 4
Pyapón	Pyapôn Kyaiklat Dedayè Bogale	***	III III III III	840 433 285 254	99 .66 44 21	14 17 2 1	10 8 2 4	963 524 333 280	659 424 276 205	172 37 23 28	50 4 2 26	44 40 19	8 6	38 18 16 16	6 8 4	31 17 13	4 3 1	4 5 5 5

MENT B.

Private-aided hospitals and dispensaries of Burma during the year 1919. (Faragraphs 5 to 14).

				-ridma saan.	enamente de la constitución de l	A	egyppegene, myggelen er til å tæry til å sterretten mygle e e - stærre	Out-	door patie	ents,	e e un un entre un annoquement	The state of the s	***************************************	1	}	- 4°
	Da	ily ave	erage		,	Nur	mber treat	ed.			Aver	age dai	ly att	endar	nce.	number of treated both ind out-door.
Number.		dren.		per-	red		Т	otal treat					Chile	lren.		number treated nd out-
Serial Nu	Male.	Female.	Total.	Attended sonally.	Represented by friends.	Men.	Women.	Waje.	Female, uar	Total.	Men.	Women.	Male.	Female.	Total.	Total patients in-door a
	(18)	(19)	(20)	(21)	(22)	(23)	(24)	(25)	(26)	(27)	(28)	(29)	(30)	(31)	(32)	(33)
1 2 3 4 5 6 7 8	1	I	69  8 10 7 8	16,155 4,222 14,839 10,438 8,833 4,822 	1,409 147 4,328 2,293 1 440 1,365	14,741 3,178 9,965 8,557 5,895 4,184 	1,171 312 2,136 1,849 1,446 828	955 538 4,361 1,432 1,862 631	697 341 2,705 893 1,070 544	17,564 4,369 19,167 12,731 10,273 6,187	72 17 35 32 28 18	5 2 7 8 7 3 	4 3 13 5 9 2	3 2 9 3 5 2 4	84 24 64 48 49 25	19,889 4,369 19,363 12,955 10,516 6,395
9	I		6	4,106	287	2,658	<b>59</b> 3	683	459	4,393	14	4	3	2	23	4,542
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11	•••		2	5,471	2,502	5,371	1,264	1,295 731	607	7,973	33 .	7	3	4 2	49 29	10,530 8,033
12 13 14	•••	•••	3 2	16,130 6,404 3,766	3,096 2,870 1,463	10,640 4,087 2,609	3,227 1,528 842	2,962 TI,983	2,397 1,676 727	19,226 9,274 5,229	54 17 10	14 6 3	12 <b>6</b> 3	5 2	91 34 18	19,558 9,356 5,282
15 16 17 18 19 20	15 5  4	13 2	472 121 20  212	60,343  13,907 21,202 4	2,387  593 3,624	46,069  12,488 15,381	10,650  4,784 	3,094  1,613 2,454	2,917  303 2,207	62,730  14,494 24,826	378  92 96 4	80   26	9 13	15  3 11	490  104 146 4	71,516 6,224 2,160 14,494 24,826 216
21 22 23 24 25	•••	• • •	10 8 9 35 6	8,807° 6,335 7,051 14,694 7,931	1,1 76 3,528 702 68 119	5,670 4,905 4,439 11,101 4,435	1,961 1,956 1,55 <sup>6</sup> 1,751 1,550	1,573 1,740 924 1,201 1,121	779 1,262 834 709 944	9,983 9,863 7,753 14,762 8,050	34 21 22 58 25	8 8 9 8	6 6 4 5 6	3 4 3 3 4	54 39 37 75 43	10,217 10,074 8,048 15,748 8,262
26 27	•••		9 7	6,486 7,181	2,328 9 <b>72</b>	5,796 4,402	1,372 1,323	87 <b>7</b> 1-370	769 1,058	8,814 8,153	24	5 5	3 4	4	34 33	9,088 <b>8,3</b> 7 <b>5</b>
28 29 30 31 32		•••	32 21 5 10	13,769 9,002 2,240 6,686 990	1,473 1,338 655 2,116	9,678 6,174 1,653 5,286 784	2,771 1,883 543 1,615 107	1,530 1,220 410 1,044 40	1,263 1,063 289 857 59	15.242 10,340 2.895 8,802 990	49 37 8 27 10	13 11 3 7	6 6 2 4 1	5 6 1 4	73 60 14 42 13	16,281 10,975 3,014 9,141 990
33 34 35 36 37 38 39 40	I	1	27 1 4 17 18 18	8,036 2,562 8,801 10,885 18,850 12,015 	469 861 435 14,576 8,223 4,835	4,647 1,499 3,899 9,772 12,297 7,480  5,780	1,537 .460 1,918 4,335 3,667 2 572 	1,269 719 1,865 5,974 6,088 4.005 	1,052 745 1,554 5,381 5,021 2,793	8,505 3,423 9,236 25,462 27,073 16,850	.35	9 2 12 24 13 11	5 2 7 23 19 14 	5 2. 7 21 15 9 	49 11 49 128 93 69	9,071 3,450 9,318 25,927 27,495 17,354 
4: 4: 4: 4:	3		43	14,477 9,022 4,280 7,004	860 1,178 3,693 2,905	8,867 5,174 4,001 4,448	3,086 1,937 2,061 3,206	1,743 1,709 1,104 1,175	1,641 1,380 8-7 1,680	15:337 10,200 7,973 9,909	29	23 7 13	13 6 7 9	13 5 5 7	107 47 51 55	16,372 10,712 8,157 9,909
4 4 4 4	5	•	19 8 7 8	7,789 7,331 13,923 9,793	1,797 429 3,130 1,197	4,708	1,183	1,422 1,074 4,735 1,840	735 2,482 1,72 <b>6</b>	9.586 7.766 17,053	31 41	17 8 12 12	16	6 3 8 7	65 47 77 57	10,134 8,050 17,347 11,097
5	9		20	10,088	692	8,225 6,321	1,801	1,253 1,720 1,267 531	1,193 1,324 952 339	1,0,061	51 45	10	7 6	5 5	66 73 67 26	14,735 13,594 10,394 5,561

Showing the number of in-door and out-door patients treated in the State-Public, Local Fund and

			***************************************	b		, amprovi, invade sources					In-doc	or pat	ients.				
			Total	treated			year.		red.	,		s per eated.	Nun of be	eds	Dai avera	ige	ïr.
District.	Name of Dispensary	class.			Childr	en.		cured	relieved.	ged e.		death otal tr	avail		numb		Number.
		Of what	Men.	Women.	Male.	Female.	Total.	Number	Number	Discharged otherwise.	Died.	Ratio of deaths percent, of total treated	Men.	Women.	Men.	Women.	Serial N
(1)	(2)	jO (3)	(4)	(5)	<b>(</b> 6)	(7)	(8)	Z (9)	(10)	(11)	(1 2)	(13)	(14)	(15)	(16)	(17)	Š
	CLASS A.—GENERAL DISPRS.—contd.								-20		= "						*
MYAUNG- MYA.	Myaungmya Wakèma Mawlamyainggyun Einmè Thayetkôn		552 326 286 205	69 7 <b>5</b> 29 6 <b>6</b>	16 7 4 8	13 6 2 3	650 414 321 282	551 357 220 269	45 21 52 7	8	21 29 30 6	3 7 9 2	33 15 6 10	7 4 2 6	24 10 8 8	3 2 1 3	1 2 3 4 5
BASSBIN	Bassein Ngathainggyaung Kyaunggôn Kyônpyaw	III III III	1,873 166 190 143	3 <sup>t</sup> 7 25 26 30	46 · 6 5 2	45 2 3 1	2,281 197 224 176	1,228 97 209 136	391 75  25	304	218 11 2 6	10 0 1 3	98	30 6 2 4	83 8 5 5	11 2 1	6 7 8 9
Henzada Amherst	Henzada Zalun Ingabu Lemyethna Myanaung Kyangin Kanaung Moulmein		898 115 148 118 274 78 	238 10 13 12 57 13	20 I I I 3 1	27 I 2 I 3 I	1,173 127 164 132 337 93	1,046 67 137 104 240 57	35 40 8 9 50 22  238	12 7 3 12 18 	44 10 8 4 17 17 176	4 8 5 3 5 II 8	34 2 6 8 18 8 	12 2 2 2 2 3 2 	33 3 5 5 12 3 	9  2  10	10 11 12 13 14 15 16 17
	Moulmein Branch Dispensary. C. D. Hospital,	III	67		 * 2	2	71	44			26	37	16	2	3	•••	18
	Moulmein. Amherst Kawkareik Ye Moulmein Leper	III III III IV	98 203 82 47	8 16 6 <b>:6</b>	4 4 1 3	I 3	223 89 69	72 202 57	12 3 20	12 4 5 17	5 . 5	9 2 6 7	8 10 6 43	3 4 3 7	4 8 3 39	•••	20 21 22 23
TAVOY MERGUI	* Asylum, Tavoy Mergui Victoria Point Palaw	III III III	1,809 718 405 109	103 41 27 2	10 4 2	10  3 2	763 437	1,210 621 309 75	288 47 78 17	158 21 15 12	239 45 19 5	12 6 4 4	96 25 14 4	4 6 2 1	80 27 20 5	4 2 I	24 25 26 27
Toungoo	Toungoo Shwegyin Thandaung Pyu Kyaukkyi		1,054 318  286	211 18  32	31 2 1 6	16	1,312 339 1 326	978 250 250	34  42	76 9	92 29 1 21	7 9 100 5	60 20  9	12 6 	40 9  12	8 1	28 29 30 31 32
THATÔN	Thatôn Kyaikto Pa-an Bilin	III III III	617 170 129	83 22 14	3 4	5	716 195 147	608 171 110	40 13 15	18 4 9	32 7 10	4 4 6	32 12 6	4 4 2	29 7 5	3 1 1	33 34 35 36
SALWEEN	Papun	I	135	7	I		143	109	12	9	9	6	18	4	3	•••	37
Тначет-	Thayetmyo Allanmyo Minhla Mind&n	III	415 276 118 131	106 32 13 20	9 3 4 7	9 1 2 5	539 312 137 163	343 250 109 118	102 40 5 13	41 9 11 19	34 4 6 5	6 1 4 3	36 9 10 8	5 2 4	20 11 4 5	5 I	38 39 40 41
Mandalay	Mandalay Town Mandalay Shore Madaya C. D. Hospital,	III III III III	2,771  110 87	595  31 13	64 2 2	58  1 2	3,488	2,661  112 73	413	44	246  5 25	7  3 24	153  1 12 12	46  7	115  4 4	20  I . I	42 43 44 45 46
	Mandalay. Maymyo Maymyo Plague	III	1,440	214	+1	37	1,732	1,534	43	28	100	6	64 10	14		6	47
	Hospital. St. Joseph's R. C. Chinese Dispy.	IV	6	6	302	197	511	501	3	• • •	7	I	4	4	2	2	49
	St. John's Leper Asylum.	IV	217	110		15	357	•••	27	66	53	15	198	170	179		50
	Wesleyan M. Home for Lepers.	IV	145	50	7	5	207	• • •	9	• • •	3	I	170	60	145	50	51

MENT B.

Private-aided hospitals and dispensaries of Burma during the year 1919—continued.

-				priais and												
	l D	:1				A.7	h t		t-door pa	tients.	<u> </u>		n.il	<b>A</b> A	1	of both loor.
er.	Da	numb	erage			Nu	mber trea				Ave	rage d			lance.	number o treated boti nd out-door,
nmbe	Chil	dren.		d per	nted ds.			Total trea					Child	1		i i i
Serial Number.	e.	Female.	al.	Attended personally.	Represented by friends.	ď	Women.		Female.	al.	ů	Women.	<u>a</u>	emale.	al.	r ts
Seri	Male.	}	Total.		1	Men.	Wo	Male,	Реш	Total,	Men.		Male.	Fen	Total,	
	- (18)	(19)	(20)	(21)	(22)	(23)	(24)	(25)	(26)	(27)	(28)	(29)	(30)	(31)	(32)	(33)
I 2	I	•••	28	14,451	937 1,610	10,43 <b>8</b> 6,738	2,466 2,572	1,500 2,422	9 <b>7</b> 5 1,7 <b>8</b> 4	15,3 <b>8</b> 8 13,516	58 37	17	7	5 7	87 69	16,03 <b>8</b> 13,930
3 4	•••		9	5,610	1,076 2,590	4,918 5,331	787 1,688	522 1,368	459 1,103	6,686 9,490	31 24	4 8	3 5	4	40 41	7,007 9,7 <b>72</b>
5	ı	•••	96	16,979	769	17,748	•••	•••	•••	17,748	100	- • •	•••	•••	100	20,029
7 8		I	10	6,340	2,691 149	5, <b>1</b> 12 4,837	I,572 I,329	1,289 1,794	1,058 1,288	9,031 9,248	34	11 6	7 6	6	58 3 <b>8</b>	9,230 9,472
9	•••	,	6	8,095	1,154	5,331	1,340	1,529	1,049	9,249	35	9	8	5	57	9,425
10	,,,	1	43	13,624 5,555	5,32 <b>1</b> 2,031	9,893 , 3,720	4,361	2,531 1,232	2,160 1,204	1 <b>8</b> ,945 7,586	6 <b>8</b>	3 <sup>2</sup>	11 4	10	12 <b>1</b> 32	20,118 7,713
12	•••		<b>5</b> 5	5,3 <b>7</b> 5 8,266	4,730 683	4,829 5,324	1,851	2,105 1,245	1,32 <b>0</b> 923	10,105 8, <b>9</b> 49	18	,8 6	6 4	4 3	36 41	10,26 <b>9</b> 9,081
14 15 16		,	3	9,927	<b>4,8</b> 69 <b>4,928</b>	7,293 8,252	2,916 3,044	2,624 2,412	1,963 2,115	14,796	<b>38</b> <b>39</b>	13	8	6	67 67	15,133
17	2	(	99	5,193 12,272	3,149	4,015 9, <b>16</b> 5	1,881 2,264	1,312	1,134 990	8,342 13,627	19	11	5	4	35 69	8,342 15,781
18	•••		•••	7,015	1,246	5,473	1,256	888	644	8,261	33	7	4	3	47	8,261
19			3 4	6,184	413	4,60 <b>9</b>	1,090	517	 381	65,97	24	6	2	2	35	71 6,708
2I 22	•••	•••	8 3	8,040	306 397	4,897	1,409	1,178 448	86 <sub>2</sub> 393	8,346 2,674	24 8	8 2	5 2	4	41	8,569 2,763
23	4	I	4+	41		36	2	3	•••	41	•••		•••		•••	110
24 25		•••	84	10,247	3,245	6,666 5,472	2,433 1,854	2,403 1,445 «	1, <b>99</b> 0 750	13,492 9,521	40 3 <b>8</b>	8 12	8 7	7 3	63 60	15,424 10,284
26 27		•••	5	3,396 5,306	8 <b>9</b> 9 3 <b>,</b> 302	2,8 <b>5</b> 9 <b>4,34</b> 9	718 2, <b>0</b> 98	379 - 1,083	339 1,078	4,295 <b>8,</b> 608	19 22	5 10	4	4	27 40	4,73 <sup>2</sup> 8,72 <sup>2</sup>
28	ı	•••	49	13,588	779	7,916	3,203	1,717	1,531	14,367	59	26	12	11	108	15,679
30		•••	10	9,479	479 1,895	5,873	2,147 548	9 <b>78</b> <b>5</b> 38	960 392	9,958 2,698 9,667	32 4 38	92 2 11	4 I 8	4 1 5	52 8 62	10,297 2,699
31 32		•••		7,368	2,299	5,508	1,733	1,454	972	•••		•••			•••	9,993 •••
33 34		•••	3 <b>2</b> 8	13,293 8,101	88 <sub>9</sub>	9,357 5,055	2,440 1,597	1, <b>6</b> 09	776 924	14,182 8, <b>8</b> 18	47 27	15	6 5	5	73 44	14,898 9,013
35 36		•••	6	4,799	2,090	3,667	1,152	1,090	980	6,889	14	4	3	3	24	7,036
37			3	5,013	79	3,783	492	530	287	5,092	19	3	3	r	26	5,235
38	ı.	•••	26	7,767	2,476	5,378	2,318	1,379	1,168	10,243	40	18	9	7	74	10,782
39 40		•••	12	9,410 5,428	746 912	<b>4,829</b> 3,368	2,200 1,155	1,560 93 <b>5</b>	1,567 882	10,156 6,340	36 22	16	6	6	72   42	10,46 <b>8</b> 6,47 <b>7</b>
41	••		6	4,827	3,500 1,665	3,808	2,455 5,544	1,136	928	8,327 26,008	22 91	28	5	4	139	8,490
42	7	3	145	24,343 6,336 5,786	837 . 448	4,053 4,554	3,544 1,463 984	2,029 772 429	885	7,173 6,234	31 25	11 5	6 3	9 8 3	56 36	<b>2</b> 9,4 <b>96</b> 7,173 6,23 <b>4</b>
44 45 46		••	5 <b>5</b>	3,662	1,053	2,585	1,355	411	364	4,715	16	8	3	2	29	4,859
47	ı	2	. 44	21,322	615	12,858	4,809	2,242	2,028	21,937	78	26	13	12	129	23,669
48		•••		•••		•••		·	• • •	•••		٠	•••	•••		26
49	3	2	9	378	•••	105	87	9r	95	378	2		I	2	7	889
50	8	14	250	13,368	•••	3,097	6,354	2,154	1,763	13,368	8	17	6	5	36	13,725
51	7	5	207	4	•••	4	•••		•••	4	4	•••		•••	4	211

STATE

Showing the number of in-door and out-door patients treated in the State-Public, Local Fund and

								\ \				In-de	oor pat	ien <b>t</b> s.			
			Total	treated	during	g the	year.					d.	Nun		Dail		
		S.			Child	ren.	1	÷	relieved.			of total treated.	of bo		numbe		er.
District.	Name of Dispensary.	class.			transport and the second			cured.		ged.		dear stalt					quin
	q	what	· c	Women.	<u>ة</u>	Female.	al.	Number	umber	Discharged otherwise.	નં	of to	ċ	Women.	ė	Women.	Serial Number.
•	٠.	Of	Men.		Male.		Total.	N	Z	Discotine	Died.	Ratio cent. o	Men.	Wo	Men.		Seri
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)_	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	
·	CLASS A.—GENERAL DISPRS.—contd.									1							
Внамо	·Bhamo Warabum	III	936	110	19	I 1	1,076	7 <b>9</b> 2	147	. 26	82	8	46	6	29	3	I 2
	Sinlumkaba Paukham	Ī	50 28	6	2		58 32	42 27	10 3	5	I I	3	4 4		2 I	•••	3
	Lwegibum Shwegu	I	39 178	7	4	•••	53 185	37 147	9 2 <b>2</b>	6   · I	I I 1	6	2 5	2 4	6	• • •	5
	Namkham Kutung	IV I	19	5	• • • • • • • • • • • • • • • • • • •	•••	24	18	6	• • •	***	•••	3	•••		•••	7 8
MYIT-	Myitkyina	I	1,122	153	30	II	1,316	1,184	18	1	71	5	37	3	46	6	9
KYINA.	Sadôn Sima	I	30 <b>4</b> 6	3 18	2	2	33 68	12 47	17	3   5	I	ı	4 3	2 1	2	ĭ	10
	Mogaung Kamaing	I	311	27 7	2	2	340 153	304	17	4 3	14	7	14	4	9 4	I	12
	Sinbo Lonton	I	141	13	5.	• • • •	159 19 6	143 9	8 5	3	<b>8</b> 3	5 16	б 3	2	5		14
Dunio	Nahpaw Fort Hertz	I	221	1	•••	71.	230	3 196	3 16	2	* * *	•••	2		6	•••	16
Putao	Laza	I	38	9 12	,	10	60	48	8		3	5	2	2 I	. I	•••	18
Катна	Katha Wuntho	I	519 189	67 10	S . 2	4	59 <b>8</b>	47 <b>6</b> 164	3 <b>3</b>	45 16	32 19	5 9	22 8	6 2	1 <b>7</b>	2	19 20
	Pinlèbu Banmauk	I	21 27	I	•••	•••	22 28	16 20	6 3	2		 II	2 2	•••	I	•••	2I 22
	Mohnyin Mansi	I	11	1	10.	 I	13		4	I	•••	•••	2		• • •	•••	23 24
	Tigyaing	I	•••	•••	•••	• • •			•••	•••	• • •	•••	•••	•••	•••	•••	25
Ruby Mines.	Mogôk Thabeitkyin Momeik	I I IV	66.7 42 180	45 4 11	6	17	750 46 197	620 28 183	49 10 1	6 1 3	49 3 7	7 7 4	34 6	6 2 2	25 1 6	2	26 27 28
SHWEBO	Shwebo Ye-u	III	613	135	2 <b>2</b> 3	16	786 209	468 148	253	1 I 29	31 12	4 6	37	14	2 <b>4</b> 8	5	29 30
	Kanbalu	Ī	12	1			13	10	I	2				• • •	***	•••	31
SAGAING	Sagaing Chaung-u	III	466 65	19 <b>0</b> 8	20 3	25 2	701 78	536 52	8r 17	7 3	39 4	6	48	12	25	10	32 33
	Myinmu Myotha	I	167	<sup>27</sup> 8	7 2	4	205	174 52	20	<b>5</b>	2 2	3	10	2 2	8 2	·	34 35
Lower	Mônywa	Ш	507	153	18	17	695	609	18	18	20	3	. 26	6	25	6	36
CHINDWIN	Yinmabin Kani	I	39		····	2	4.5	37	5	2	•••	•••	2	•••	····I	•••	37 38
UPPER	Budalin Mawlaik	I I	224	10		ī	236	188	10	7	2.4	10	20	4	6		39 40
CHINDWIN	Mingin	I	81	9	1		91	73	9	2	4	4	6	4	3		41 42
	Paungbyin Homalin	I I	311	11	ı	2	326	265	6 34	6 12	13			4	3		43
	Kalewa Kalemyo	1 1	7 <b>1</b> 64	6	3 2	6	1 1	60 51	7 15	5	6 2	3	8 6	4	3	• • •	45
D t	Masein Tamu	I	36	3 48			39	25	2	3	8		1 -		20	•••	47 48
Pakôkku	Pakôkku Travg. Dsy Pauk		448		13	I		413	72	5 ,	20				•••	***	50
	Gangaw	I	55	Io	3	2	5.6	45	3	. 1	2	4	8	4	4 4		52
	Mindat Sakan Kanpetlet		84 71 260	6 6	r	2	80	79		r	5		I	I	3 3	1	54
Mexico	Yenangyat Tiiln Min bu	IV	•••	.:	8	1.2	.,							,		•••	56
MINBU	Salin	III	37 <b>I</b> 160	50 22	8 2	12		311		5	20	5 5			1 -	1	
		1					1	1	1		1			,			

MENT B.

Private-aided hospitals and dispensaries of Burma during the year 1919—continued.

-				.				And the second s		r patients							nts
				rage	Samuel Sa	nade a management	Nur	nber treat	ed.			Ave	rage d	aily a	ittend	ance.	Total number of patients treated both in-door and out-door.
	er.		umb	er.	on-	by	t desiran — many glas <del>ing generalis</del> e	T	otal treat	ed.	1			Chile	dren.		of points
	Number.	Child	lren.		pers	ed	1		Child	lren.	-						nber oth
	Z		e.		Attended person- ally.	Represented Friends.	1	en.		<u>.</u>			en.		lle.		nun 1 bo or.
	Serial	Male.	Female.	Total.	tten ly.	epre	Men.	Women	Male.	Female.	Fotal.	Men.	Women.	Male.	Female.	Total,	otal sate it-do
1	Ñ	1 1		,				1			1					i i	
		(10)	(19)	(20)	(21)	(22)	(23)	(24)	(25)	(26)	(27)	(28)	(29)	(30)	(31)	(32)	(33)
							4			•							
	I	• • •		32	14,638	5,765	12,842	4,133	2,005	1,483	20,463	87	29	10	9	135	21,539
	3	• • •	•••	2	655 3,43 <b>5</b>	1,669	2,510	407 1,657	62 480	357	77 <sup>6</sup> 5,104	8	1 5	ī	ī	2 15	776 5,162
	4 5	•••	• • •	1 2	2,481 4,984	840 1,562	1,59! 3,578	1,331 2,268	219 407	180 293	3,321 6,546	4 11	4 6	I	I	10 19	3,353 6,599
	6	***	• • •	6	6,276	1,229	4,016	1,601	925	963	7,505	20 10	7 6	4 2	4 2	35	<b>7,</b> 6 <b>9</b> 0
	8	•••		•••	3,262 . 2 <b>7</b> 1	1,735	2,435 111	1,452 66	616 53	494 41	4,997 27 1	. 5	ī	I	I	5	5,021 271
	9	I	ī	54	18,56 <b>0</b>	1,099	13,151	2,862	2,223	1,423	19,659	78	14	Io	6	108	20,975
	10	***		3	2,021 5,007	109	1,385 2,830	3,0 <b>8</b> 5	47 4 <b>7</b> 0	88 5 <b>7</b> 0	2,130 6,955	5	2	2	2	7 22	2,163 7,023
	12	•••		10	5,274	3,063	4,276	1,706	1,151	1,204	8,337	18	9 <b>8</b> 6	4	5	35	8,677
	13	• • •		6	5,9 <b>7</b> 3 8,328	1,078 705	3,761 4,804	1,275 2,335	953 1,064	1,062 840	7, <b>05</b> 1 9,0 <b>3</b> 3	19	9	4 4	5 3	34 34	' <b>7,204</b> 9,192
	15	•••		i	1,247	4,153 380	1,392	597 715	1,737 159	1,674	5,400 2,131	7 5	3	5 I	5	19	. 5,419 2,137
	17			6			5,847	251			6,324	23	I			24	
	18	•••	•••	I	5,77 <sup>8</sup> 1,497	546	1,088	321	135 54	91 45	1,508	5	I	•••		6	6,554 1,568
	19	•••	•••	19	10,015	714 871	6,753	1,929	1,175	872 1,1 <b>5</b> 0	10,729 6,728	36 18	10 6	5 5	5	55 3 <b>4</b>	11,327 6,929
	2I 22			1	4,361	714 2,186	1,750	1,163	1,216	946 1,623	5,07 <b>5</b> 5,406	9 8	5	5	4 8	23 27	5,097
	23			••••	4,293	2,281	2,519	1,200	1,408	1,447	6,574	13	6	6	6	31	5,4 <b>3</b> 4 6, <b>5</b> 7 <b>4</b>
	24 25			***	2,180 3,0 <b>7</b> 7	1,001	1,256 1,990	499 1,217	703 664	723 378	3,181 4,249	13	7	3	3 2	14 25	3, <b>1</b> 94 4, <b>2</b> 49
	26	ı		28	12,605	1,918	7,661	3,670	1,883	1.309	14,523	53	26	12	9	Lco	15,273
	27 28		•••	1 6	1,976	185	1,383	370	<b>2</b> 22 \$60	186	2,161	8	2	I	I	12 26	2,207
					4,143	1,083		1,139		547	5,226	13	5	5	3		5,423
	30	···	1	31	13,842	831 860	8,123 3,796	2,734 2,030	1,924	1,892	14,673 7,831	50 23	17	13	7	92 <b>5</b> 0	15,459 <b>8,040</b>
	31		•••	•••	3,147	242	1,965	546	438	440	3,389	23	7	5	5	40	3,402
	32	1	I	37	20,904	2,167	10,699 2,527	5,630	3,770	2,072 1,304	23,071 7,065	74	45	24	10	162 36	23,772
	34		1	9	11,478	1,111	5,082	2,993	2,395	2,119	12,589	27	14	II	10	62	7,143 12,794
	35	•••		2	8,714	418	4,335	3,167	898	732	9,132	18	13	4	3	38	9,1 <b>9</b> 5
	36	•••	I	33	9,230	1,757	4,706	2,493	2,122	1,666	10,987	28	17	15	14	74	11,682
	38			I	5,903	995	2,817	1,520	1,093	1,468	6 <b>,8</b> 98	14	8	6	, 9	3 <b>7</b>	6,943
	40			6	7,928	1,940	6,394	1,452	1,174	848	9,868	27	6	4	3	40	10,104
	4I 42			3	736	3,650	538	381 2,769	2,658	2,043	1,217	2 29	. 11	10	8	6 58	1,217
	43			3	7,471 8,583	1,042	4,877 5,934	2,274 1,632	1,023	939	9,113	23	8	3 6	3 4	38 42	9,229
	45	•••		2	7,201 7,879	1,216 2, <b>50</b> 6	4,477 6,048	1,752 2,282	1,214	974	8,417	15	6 8	4	3	28	8,508
	47			3		400	•••	•••	1,101	954	•••	•••		٠٠,	3	38	10,457
	48 49 50		•••	22	3,494	1,040	7,357	734	553	930	3,700	51	14	7	5	18 77	3,739
	51			4	4,631	1,252	2,447	1,325	1,035	1,076	5,883	1.4	8	5	6	33	6,013
	53			3	6,346	1,152 952	3,402 5,216	1,955	1,096	1,045	7, <b>49</b> 8 8,419	14	8 6	5 2	5 2	32 26	7,554 8,504
	54 55			4 9	3,656	258	2,849	7 2 6 700	47 493	38 569	3,660	10	2 4	3	4	12 26	3,740
	56			•••		844	•••	1,649			8,023	,	• • • • • • • • • • • • • • • • • • • •			•••	***
	57 58				7,179 6,697	766	4,133	1,130	1,397	703 803	7,463	30 25	7	5 6	6 4	52 42	8,46 <b>4</b> 7,6 <b>48</b>
	1	1		1	1		1		-		1		-				

Showing the number of in-door and out-door patients treated in the State-Public, Local Fund and

	,				,								In-d	oor pat	ients.			
5			Т	Γotal t	reated	during	the	year.		73			er ed.	Nun of be	eds	Dail avera	- 1	
District.	Name of Dispensar	y.	class.			Childr	en.		cured.	reliev <b>e</b> d.	q		ths p	avail	able.	numb	er.	Number.
			Of what	Men.	Women.	Male	Female.	Total.	Number	Number	Discharged otherwise.	Died.	Ratio of deaths per cent. of total treated.	Men.	Women.	Men.	Women.	Serial Nur
(1)	(2)		(3)	(4)	(5)	(6)	<u>(7)</u>	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	
MINBU— concld.  MAGWE	Sagu Pwinbyu Magwe		I	 188 336	 22 45	  6	,	 212 391	 176 283	 5 47		 5 35	 2 9	  8 16	 2 6	7	 I 2	I 2 3 4
	Taungdwingyi Yenangyaung Salè	·   I		210 625 18	28 55 2	3 7 1	1 5	692 21	170 628 12	35 11	15 	9 31 2	4 4 10	22 26 2	8	10 26 1	I 2	5 6
Kyauksè	Kyauksè Myittha	. 1	Ш	63 <b>1</b>	8 <sub>2</sub> 28	7	14 2	734 189	526 149	142	27	22 8	3 4	32	8 4	19	2 I	7 8 9
MEIRTILA	Wundwin		I	505	78	3	8	594 27	507 24 281	44 1 8		20	3	30 4	10 1	<sup>2</sup> 4 3	4	10
Yamèthin	Pyawbwè .	. I	I III III III	507 135 570	39  89 27 107	3 2 15	6 I	309  605 165 701	 540 ~ 121 545	9 34 94	13  12	13  17 4 40	3 2 6	10  32 8 23	6 4 6	25 5 20	3	12 13 14 15 16
MYINGYAN	Lewe Myingyan	$\cdots$ , 1	111 111 111	693	109	15	18	835 194	65 <b>7</b> 166	37 10	55 7	43 2	5 1	31	7 2	33 6	 5	17 18 19
Northern			I	79 628	23 33	1 6	6	673	89 578	9 5	2 11	60	9	16		2 18	I	20 21
SHAN STATES.	Kutkai . Tangyan . Hsipaw Naunghkio .		I IV IV	11 7 544 23	3  46 2	7	II	15 7 608 25	5 5 545 20			2 2 53 2	13 29 9 4	22 i	2	 17	2	22 23 24 25
	Namhsan .		IV IV	8		•••		8	3	ı	•••	3	38	• • •	•••	•••		26
Southern Shan States.	Loikaw . Loilem .	••	I	424 110 84	83 13 10	21	15 4 I	543 129 95	503 114 61	4 19	4 4	20 6 5	5 5	26 4 4	2 2	16	3	28 29 30
	Yaunghwè Loimwe	•••	IV I	291 266 71	49 59 2	7 11 1	5 4 1	35 <sup>2</sup> 340 75	265 258 71	35 31 2	20	37 15	4	10	4 2	10	2	31 32 33
	Nammawngun Bampôn	••	III	561	<b>50</b> 5	<b>20</b> 6	8 2	639	<b>54</b> 9  25	3		39	6	8 <sub>2</sub>	4	16 		34 35 36
CHIN		y.	I	174	 2 I	3	ī	 199	157	:4	17	6	3	Io	2	5	I	37 38
HILLS.	T-T - 1- o		I	46 31	2	•••	•••	33	45 16	6	8	3	9	6 8	4 4	2	•••	39 40 41
	Tunzan	••	I	17	9	2	•••	28	22		6			8	6	<b>I</b>	•••	42
			6	5,861	9,358	1,765	1,260	78,244	53,496	7,405	8,599	5,744	7	3,883	1,11!	2,952	194	43
Rangoon Town.	Dufferin M. Hospl	I.	I	•••		•••	•••		1,419	8		 42	3	• • •	47	· · · · · · · · · · · · · · · · · · ·	44	44 45
BASSEIN	Spl. Dy. for Wome Bassein Moulmein	n 	1 1 1	•••	•••	•••	•••	•••		•••	•••	•••	•••	• • •	• • •	• • •	•••	40 47 48
AMHERST	Ellen Mitche Memorial Hospit		IV	• • •	180	35	36	251	103	95	2Q	14	6	•••	32	•••	8	49
MANDALAY	Mandalay Yadanabon M. Hs Spl. Dy. for Wom Maymyo.			•••	48	•••	•••	48	46	•••	•••	2	4	• • •	• •	• • •	•••	50 51 52
	Total, Class B .	.		• • •	1,711	35	36	1,782	1,568	103	34	58	3		79	•••	52	
	GRAND TOTAL	{   I	19196 19186 19175	5,861 24,19 6,586	11,069 to,605 10,116	1,800 1,717 1,652	1,296 1,052 1,049	80,026 75,793 69,403	55,064 54,238 51,240	7,508 7,134 6,808	8,633 5,769 4,431	5,802 5,779 4,008	7 8 6	3,883 3,788 3,770	1,209	2,952 2,889 2,740	551	

MENT B.

Private-aided hospitals and dispensaries of Burma during the year 1919—concluded.

		Andregorius and a strong	4		4		ting the second section of the second section is a second section of the second section sectin	Out	t-door pat	ients.			Marine Miller Shift, Albert	elle den Siete, a <u>us</u> gegeschad <sub>e</sub> "Tille		• У Т
	Da		verage			Num	ber treate				Ave	erage d	aily a	ttend	ance.	Total number of patients treated both in-door and out-door.
er.	-	num		-uo	by	•	T	otal treat	ed.	ruspenned rushiner i allerinus hill de della publish della.			Chile	lren.		of po
Number.	Chil	dren.	P 1	pers		e dan san erdadum agua	an u.s. us dissipated	Chile	dren.	**************************************		,				nber ooth i
Serial N	le.	Female.	Total.	Attended person- ally.	Represented Friends.	ri,	Women,	<u>ə</u>	Female.	<u>aj.</u>	ë.	Women.	Male.	Female.	Total.	Fotal nun treated b out-door,
Ser	Male.		1		Rep	Men.		Male.		Total.	Wen. (28)		1		1	Tota tree
	(18)	(19)	(20)	(21)	(22)	(23)	(24)	(25)	(26)	(27)	(20)	(29)	(30)	(31)	(32)	(33)
1				697	74	488	148	87	48	70.1	8	2	I		11	771
2 3	•••		8	795 6,947	279 923	671 5,285	2 <b>7</b> 1	74 578	58 505	771 1,074 7,870	12 20	6	1 3	1 3	33	1,074 8,082
4 5 6	•••	•••	16 11	8,184 7,526	8 <sub>1</sub> 9	5,045 5,35 <sup>2</sup>	1,964 2,359	1,231 1,480	1,063 1,206	9,303 10,397	39 35	17	9	9 5	74   61	<b>9,</b> 694 10,639
6 7 8	•••	•••	28 I	7,904 1,442	988 66	6,532	1,399 228	528 142	433 97	8,892 1,508	3 <b>7</b>	7 2	2 I	2 I	48 13	9,584 1,529
9	•••		22 5	8,6 <b>98</b> 5,1 39	1,793	5,396 2,757	2,441 1,112	1,273	1,381	10,491 5,312	33 19	13	9	5	67 38	11,225 5,501
10	•••		28	7,643 1,514	481 631	5,643	399	573 2 <b>7</b> 9	302	8,124 2,145	55 15	10 5	3 4	3 4	71 28	8,718 2,172
13	• • •	•••	28	6,720	121	4,556 9,380	1,122	645	518	6,841	33  46	20	3	6	43	7,150  16,074
15	•••	···	6 26	12,770 5, <b>9</b> 49 *9,817	2, <b>6</b> 99 91 <b>6</b> 636	4,569 6,045	3,535 1,227 1,946	1,45 <b>4</b> 596 1,453	1,100 473 1,009	6,865	28 41	7	7 3	2 5	79 40 66	7,030
17	 I	 I	40	1,901 10,863	315	1,229 8,279	516 2,3 <b>6</b> 4	227 1,418	244 1,051	10,453 2,216 13,112	30 52	15 15	7 5 8	5 6	55 81	2,216 13,947
19	•••		6	4,422	364 1,810	3,00 <b>6</b> 2,687	728	633 744	419 586	4,786 5,495	22 I2	5	4 4	3 3	34 28	4,980 5,599
2I 22	•••	•••	<b>419</b>	6,543 3, <b>9</b> 0 <b>8</b>	651	5,370 3,500	924 670	541 655	359 33 <sup>2</sup>	7,194 5,15 <b>7</b>	26 12	5 2	3 2	2	36 17	7,867 5,172
23 24	•••		20	1,778 8,201	724 1,688	1,804 7,189	438 1,864	161 500	99 336	2,502 9,8 <b>8</b> 9	12 44	3 12	3	1 2	17 61	2,509 10,497
25 26	•••	•••	I	<sup>2,534</sup> 4,821	35 <sup>8</sup> 422	1,914 3,548	535 1,020	294 358	317	2,892 5,243	11 22	· 3	2 2	I 2	32	2,917 5,243
27 28	 I	•••	20	2,726 10,7 <b>7</b> 5	375 2,412	2,244	608	140	109	3,101	9 34	3 11	I 7	1 5	14 57	3,109 13,730
29 30		•••	4 4	3,785 2,908	637	3,167 2,071	1,265 842	427 404	343 228	5,202 3,545	13	5	3	I 2	21 24	5,3 <b>31</b> 3,64 <b>0</b>
31 32	•••	•••	12	5, <b>7</b> 03 21,474	3,131 3,946	5,053 13,854	2,161 9,365	969 1,261	651 940	8,834 25,420	27 79	5 <b>5</b>	7	<b>5</b> 5	51 146	9,186 25,760
33	ı	•••	18	1,627 9,4 <b>70</b>	63 <b>6</b> 1,416	8,535	415 1,199	360 622	259 <b>5</b> 30	2,263 10,886	6 54	6	3	3	66	2,338 11,525
35 36	•••		Ţ	59 <b>8</b> 1,722	18	343 911	143 580	56 123	62 126	<b>6</b> 04 1, <b>7</b> 40.	3 7	5	 I	I	5 14	604 1,769
37	•••	•••	6	6,586	967	4,540 2,469	1,808	6 <sub>5</sub> 8	547 289	7,553	14	5	3	2	23 12	7,752 3,76 <b>7</b>
39 40	•••	•••	1 2	3,424 2,217	295 525	1,663	397 610	248	209	3,719 2,742	5	2	2 1	I	9	2,775
41 42	•••	***	I	5,710	840	2,591	1,818	1,085	1,056	6,550	16	8	4	6	34	6,578
43	71	56	3,573	13,95,951	279,239	964,377	319,386	2,17,838	173,589	16,75,190	5,456	1,734	983	819	8,992	17,53,434
					0											
44 45 46	•••		44	12,429	538	•••	6,977	2,770	3,220	12,967	•••	56 79	17	21 20	<b>94</b> <b>9</b> 9	12,9 <b>6</b> 7 16,515
47	•••	- • •	•••	1,434	94	• • •	6,303	2,209	2,164	1,434	•••	32	12	1 I	4 <b>7</b> 55	1,434
48	4	3	15	1,221	43	•••	267 809	116	91 270	474 1,264	•••	7	4	3 4	18 12	47 <b>4</b> 1,515
50		•••	•••	10,156	42		5,656	2,376	2,166	10,198	•••	38	16	13	67	10,198 <b>4</b> 8
52				•••	•••	•••	•••		•••	•••	•••	•••		•••	• • •	
	4	3	59	51,327	718		32,031	7,820	12,194	52,045	•	267	52	73	392	53,827
	75 67	59.	3,632	14,47,278	279,057	961,277	351,417	225.658	185.783	17,27,235	5 456	2,001	1,035		9,384	> .07.261
	59	49	3,556	14,87.777	288 333	979,885 978 413	363 294 370,172	239 310 248,812	193,591 200,729	17,76,110	5,.85	2,082	1,143	949	9,528	18,51,403

Showing the diseases, etc., of the IN-DOOR patients treated in the State-Public, Local Fund and

	of Dis- try.		1						1						Inf
District.	Class of pensary	Chole	ra.	Dysent	ery.	Enteric	fever.	Gonorr	hœa.	Kala A	Azar.	Lepro	osy.	Mala	ıria.
(1)	(2)	(3		(4		(5)	)	(6)		(7		(8	)	(9	)
•.		Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
Akyab Paletwa Cyaukpyu Indoway Rangoon Town Insein Hanthawaddy (Syriam) Pegu Tharrawaddy Prome Ma-ubin Pyapôn Myaungmya Bassein Henzada Amherst Tavoy Mergui Toungoo Thatôn Salween Thayetmyo Mandalay  Mandalay  Bhamo Myitkyina Putao Katha Ruby Mines Shwebo Sagaing Lower Chindwin Upper Chindwin  Pakôkku		270 2 3 121 2 1 2 1 8 20 18 15 95 33 33 6 4 3	161	135 4 4 8 393 44 113  84 65 57 56 101 54  101 52 100 101 210 60 122 43 12 36 17 15 13 29 3 81 17 17 17 17 17 17 17 17 17 1	16 54 22 18 13 14 13 14 13 14 13 14 13 14 13 14 13 14 15 16 17 18 18 18 18 18 18 18 18 18 18	57	I  I	59 5 6 3 136 7 32 51 77 222 18 39 14 50 10 45 27 18 20 2 20 4 229 13 16 1 46 2 41 9 16 3 7 5 9 5 11 2	I	3		I 212	I	597 43 39 87 328 21 43 140 207 407 261 77 387 250 272 218 145 4 477 273 355 74 62 137 32 972 120 104 442 2 856 114 352 372 82 42 132 16 75 120 83 270 70 32 11 85	14 4 26 1
Minbu Magwe		4 13 1	2 . 9 . 1	7 10 20 2	3	3	•••	3 16 7 9	• • •	2	•••	•••	•••	35 46	<sub>1</sub>
Kyauksè Meiktila Yamèthin		1 11 1 3	1 4 1 1	18 3 8 16 15	 I 		•••	12 4 6 16 37 6			•••	  I		31 65 267 173 188	3 
Myingyan	Щ	16	10	27		•••	•••	16	•••	•••	•••	1	•••	58	 I
I. Shan States	IV	•••		15	3	•	•••	11	***	***	•••	•••		455 344	35
Shan States	IV	•••	•••	72	9		100	10		• • •	•••	···	•••	102	5
Chin Hills	1	•••	•••	13	2		•••	3	•••	•••	•••	•••	•••	128	I
Total for the Province	III	157 654 8	3 6 2	809 1,795 141	94 2 <b>9</b> 1 4	125	11 4 <sup>2</sup> 4	347 916 46	1 I 2	5 8	• • •	3 17 846	1 5 76	4:45 <sup>2</sup> 6,857 7 <sup>1</sup> 7	136 191 28
GRAND TOTAL	1919	819 280 176	424 147 83	2,745 2,204 2,030	389 293 282	208	57 58 47	1,309 1,182 1,262	13	13 1 48	 1 6	866 880 797	78	12,026 11,548 11,632	355 298 292

Private-aided hospitals and dispensaries of Burma during the year 1919 (Paragraph 15).

Showing the diseases, etc., of the IN-DOOR patients treated in the State-Public, Local Fund and

		Dis-							disease	es.									
District.	1	Class of pensary.	Anær		Diabe	etes.	Scur	vy.	Normalign	nant.	Malign	nant.	All of gene disea	ral	Disease the new system	rvous	Diseas the e	ye.	Number.
(1)		(2)	(1		(2		(2		(22		(2		(2		(2	5)	(2)		Nun
			Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Serial
Paletwa Kyaukpyu Sandoway		III III III	80  3	9		•••		•••	18		6  2 86	2 	3		37 1 5 12		3 <sup>2</sup> 3  6		1 2 3 4
Rangoon Town Insein Hanthawaddy	{	IV III III	330 10 21	66 3 1		•••		•••	110		• • •	 	3,126 5 1	<sup>2</sup> 9	263 6 4	16	341		5 6 7
Pegu	{	I	32		•••	•••	•••	•••	3	•••	2	•••		***	25  14	3 	15	•••	9 10
Tharrawaddy Prome Ma-ubin Pyapôn Myaungmya	•••	III III III III III	34 30 32 24 25	4 5 3 8	2 3	··· I		•••	15 13 4 20	•••	8  2 5	 	6 <b>7</b> 6 8		26 21 23 21	2 2 	17 10 19 2	•••	11 12 13 14 15
Bassein Henzada	{	I III III	36 16	8	···		1		7	•••	8 21	<sub>2</sub>	5		36 28	5 2	9 25	•••	16
Amherst	{	III IV	39 5 28	•••	4	•••		•••	32	• • •	19	5	24 5	•••	55	 II	43	•••	19 20 21
Tavoy Mergui 'Toungoo 'Thatôn Salween	•••	III III III III	28 19 50 11	7 5 16 2		•••	•••		4 6	• • •	11	2	3 1 8 101	2	15 16 21 13	2  2 I	21 21 16 17		22 23 24 25 26
Thayetmyo  Mandalay	{	III	23	12	3	2	1 		5		15		30		16 1 125	2 9	170	•••	27 28
Bhamo	{	IV I III	4 5 57	5			1			•••					5 7		166	•••	30 31
Myitkyina Putao	:::	IV	30	3	• • • • • • • • • • • • • • • • • • • •		••	•••	3	•••	2	t	•••	•••	36	2	44	•••	32 33 34
Katha Ruby Mines	{	Î I IV	17 23 8	3 2			•••	•••	2	•••	3	I		•••	7 9	1 1	16	•••	35 36 37
Shwebo	}	III	1 20		I				7	•••	3 7	I 2	3 2		3		13	•••	38 39 40
Sagaing  Lower Chindwin	{ {	III	12 	•••	ĭ		- i		5	•••	2	•••	•••	• • •	12 1	2	22 28 1	•••	41 42 43
Upper Chindwin		III	1 10	•••	I		•••	•••	2	•••	10 2	··· I	2 ĭ	•••	16		86 25 10	•••	44 45 46
Pakôkku	{	III IV I	5 I 2		•••		1	•••			6	•••	2	••	3 3	1	27 8 4	•••	47 48 49
Minbu Magwe	··· {	III	9	2 I	1	•••		• • •	2	•••	4			• • •	5 5		23 6 2	•••	50 51 52
Kyauksè	{	IV I	9 6	1	1		•••	, , ,		•••	•••	•••	* * *	***	2 2 2 1	•••	6 2	•••	53 54
Meiktila Yamèthin		I	38	3		•••	••••	• • •	6 6	). 	5 <b>5</b>		3	•••	18		49 31 27	1 • •	55 56 57 58
Myingyan  N. Shan States	{	III	10 I I		• • •		1	•••	8	•••	12	T T		• • •	12	I I	23 3		58 59 60
S. Shan States Chin Hills	{	IV IV IV	14 23 14 8	2 I I I	ī			•••	2 2 1	•••	7		3 1	3	3 21 7 7	2 I	5 25 3 10	•••	61 62 63 64
Total for the P	ro-{	I III IV	500 826 66	78 111 7	20	4			.132 201 3	5	115 161 6	12 24 1	3,157 233	32 6	412 675 27	23 52 3	568 794 215	19	
GRAND TOTAL	{	1919 1918 1917	1,392 1,238 1,417	196 223 233	40	4 7 2	9	1	336 360 374	5 2 3	282 312 266	37 45 26	3,401 393 536	38 39 43	1,114	78 124 131	1,577 1,605 1,872	19	

MENT C (I)

Private-aided hospitals and dispensaries of Burma during the year 1919—continued.

heade-way Anamagea	S	ystemic	Diseas	ses.		e Plempas u		eller v in one seep menoran	agelemento a del con del como constitución de la co	0	nazarna en albertanten ben en en estata.	nggggggggggggggggggggggggggggggggggggg	n Sved di <b>is sit a</b> hadh ann an ar Canacasana			n-ymhraundhaideirinn				
umber.	Disea the	ses of ear.	Disea	uses of nose.	of to	la <b>t</b> ory tem. 29)	system			epsia.	Diarr	(2)	the	ess of liver.	of liv	the er.	App	endi-	disea the di sys	other ses of gestive tem.
Serial Number.	Cases.	Deaths.	Cases,	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 1 22 23 24 25 26 27 28 29 30 1 32 33 34 35 36 37 38 39 40 41 42 43 44 45 6 47 48 49 50 51 52 53 55 56 66 66 66 66 66 66 66 66 66 66 66	2 11 2 2 11 3 3 3 3 4 4 4 3 4 4 3 3 1 9 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		2		7 14 2 197 17 2 8 5 10 10 11 30 7 8 18 7 5 6 8 1 15 15 3 4 3 3 4 15 3 10 15 275	23 6 3 3 2 7 8 3 4	43 311 7329 15 450 555 456 20 44 430 52 39 127 919 44 432 21 22 33 3186 63 926 28 15 422 11 17 14 43 71 15 15 40 40 40 40 40 40 40 40 40 40	26 26 2 2 2 1 3 1 1 2 1 1 1 2 1 1 1 2 1 2	13 14 3 115 8 20 14 50 22 10 98 51 2 17 33 18 33 15 15 15 17 3 17 3 17 3 17 3 17 3 17 3 17 3 17 3 17 3 17 3 17 3 17 3 17 3 17 4 3 17 4 3 17 4 3 17 4 3 17 4 4 5 17 18 19 10 10 10 10 10 10 10 10 10 10		38 4 5 9 345 6 6 43 6 9 42 24 26 36 23 5 7 4 8 2 9 7 14 2 8 9 13 12 7 3 15 8 2 47 5 8 2 47 5 8 8 8 9 13 12 7 10 2 14 2 8 9 13 12 7 3 15 8 2	5 I 79 I 4 /27 I2 I4 II 9 8 I7 I 35 2 I5 II I 3 I0 I 2 I 3 I 2 I I 3 I 9 9 I I I 9 9 I I I I I I I I I I	6 36 1 2 3 1 1 3 1 4 3 5 7 2 4 1 20 1 1 21 1 21 1 21 1 22 21 22 21 21 21 21 21 21 21 21 22 21 21 21 21 21 21 21 21 21 21 22 22 23 24 24 25 26 27 27 28	3	20 2 7 105 3 96 8 19 2 9 9 15 1 6 4 1 6 8 7 44 3 2 11 1 4 1 2 3 14 1 4 1 2 3 19 14 1 4 1 2 3 19 1 19 1	1 1 3 1 3 1 2 2 3 1 2 3 1 7 1	4 103 3 2 3 1 1 2 1 1 4 1	I  I	61 2 6 17 794 109 6 81  64 63 39 50 60 23  85 47  161 31 37 38 69 35  45 12 31 31 31 31 31 31 31 31 31 31	7 36 1 36 2 2 2 6 5 3 2 11 31 2 2 3 1 1 1 2 3 1 1 1 2 3 1 1 1 2 3 1 4 9
	33 109 10	<u>I</u>	58	• • •	211	43 61 7	1,155	32	581	3	8 <b>38</b> 51	7	75 1	 	242 II	36	53 I	4	1,363	71 4
	152 138 163	I I	71 63 61		513 463 500	116	1,949 2,034 1,874	70 75 66	798 681 751	3 3 2	1,364	310 232 224	121 105 104	25 31 16	444 462 503	6: 73 60	164 137 150	16	2,548 2,595 2,714	124 197 184

Showing the diseases, etc., of the IN-DOOR patients treated in the State-Public, Local Fund and

tara tarka non	Dis-	ontaline and the transport is	page 1	no na sheefi	- while the state of the state	untimental y plus special		unga dalaman ang ga agamenadan kalamatan dalama							•		Syste	emi <b>c</b>
District.	Class of L	Inflammation and suppuration of lymph glands.		Goitre,		Bright's disease.		All other diseases of the urinary system.  (40)		riyaroceie.		Other diseases of the generative system.		Diseases of the organs of loco- motion. (43)		Diseases of the connective tissue. (44)		Serial Number.
	(2)	(		ť						1			and the contraction in		SI	1		Z
		Cases,	Deaths.	Cases.	Deaths.	Cases.	Deaths	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths	Cases.	Deaths	Serial
Akyab Paletwa Kyaukpyu Sandoway Rangoon Town Insein Hanthawaddy Pegu Tharrawaddy Prome Ma-ubin Pyapôn Myaungmya Bassein Henzada Amherst  Tavoy Mergui Toungoo Thatôn Salween Thayetmyo Mandalay  Mandalay  Bhamo  Myitkyina Putao Katha Ruby Mines  Shwebo  Sagaing  Lower Chindwin Upper Chindwin  Pakâkku	III	29 5 315 1 40 23 14 14 9 53 12 21 9 30 12 8 20 2 34 17 5 17 5 19 6 7 9 8 2	23			54 1 1 2 82 13 2 13 4 5 4 12 34 4 31 35 2 16 5 6	5 9 3 2 1 1 4 2 8 1 1 4 3	27 9 5 140 24 7 25 24 15 32 17 16 25 35 35 10 11 8 19 1 32 4 3 1 25 1 10 4 3 1 11 2 1 6	3 I I 2 6 1 1 2 1 1 1	12 1 2 268 46 11 5 15 13 0 9 50 50 524 11 3 2 2 3 6 4 1 1 1	IO	52 7 451 22 16 89  25 63 15 60 97 34  53 65  79 31 41 14 51 20 24 44  92  60 13 13 13 13 13 14 14 15 16 16 16 16 16 16 16 16 16 16	1	8 2 9 149 4 18 2 16 10 13 22 14 15 33 41 1 3 7 15 4 43 43 45 10 4 6 5 10 4 6 12 4	I	209 12 5 28 508 7 23 109 100 193 69 54 134 87 161 1 51 52 91 75 2 74 11 112 14 32 71 9 32 34 11 7 46 4 23 18 37 16	30 I	1 2 3 4 5 6 7 8 9 10 1 1 1 2 1 3 1 4 1 5 1 6 1 7 1 8 1 9 2 0 1 1 2 2 2 3 2 4 2 5 2 6 2 7 2 8 2 9 3 0 3 1 3 2 3 3 3 4 3 5 3 6 3 7 3 8 3 9 4 0 4 1 4 2 4 3 4 4 5 4 6
Pakôkku }	III	4	•••	•••	•••	6	•••	6	I	1		8	•••	13	•••	II	***	47
Minbu	I	3 1 11		•••	•••	2	I	1 14 6	 2 1	2 2	•••	3 27 13	•••	9 2 5 8	• • •	20 18 13	•••	48 49 50 51
Magwe	III	29	,	* * *	•••	3 2	•••	4	•••	1		3 8	1	2	•••	16	•••	52
Kyauksè	1			•••		I	•••		•••	3		3		2		7		53 54
Meiktila		8 2	•••		• • •	4	I	-	•••	•••		5		9	1	27 25	•••	55 56
Yamèthin	$\mathcal{L}$	41.	•••			4		I	I	14		63		12	•••	79		57 58
Myingyan	S III	12	•••	1		3 2	•••	16	1	4		20		11 6		49	•••	59 60
N. Shan States	{ IV	7	•••			7		3 5	•••	•••		6 44		7		19		61 62
S. Shan States Chin Hills	iv I	6				5	1	3	• • •			18		7	•••	14	•••	63
Total for the Pro-		395 511 44	24 I	16		120 26 t 8	15 60 3	462	14 30 1	28 <sub>1</sub> 3 <b>05</b>	10 2	616	26 17	243 376 11	10 3	877 2,138 78	33 31 1	
GRANII TOTAL	1919 1918 1917		25 15 28	18 25 22	•••	389 335 326	71	685	45 64 55	593 740 693	1 2 6 5	1,865 1,655 1,812	31	630 701 715	13 11 18	3.093 2,845 2,899	65 61 44	A single-supplementary for other two distributions and the supplementary of the supplementary

MENT C (I).

Private-aided hospitals and dispensaries of Burma during the year 1919—concluded.

Ţ	)isea <b>s</b> e	es — con	lude	d.			1		Gen	eral an	d Lo	cal.			Lal	oour.		Tatal			
	ber.	Ulce		Oth diseas	es of cin.	All of local disea	al ses.	Injur (genera local	l and	By	m.	By of	ons.	Norm		Abnor	rmal.	•	door nts.	Operati	ons.
	Number.	(45		(40		(47	THE RESERVE OF THE PERSON NAMED IN	(48)		(49	)	(50	)	(51		(52		(53		(54)	
	Serial 1	Cases.	Deaths	Cases.	Ueaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Caŝes.	Deaths.	Cases.	Deaths.
	1 2 3 4 5 6 7 8 9 10 11 2 13 4 5 6 17 8 9 20 1 2 2 2 2 2 2 2 2 2 2 3 3 3 3 3 3 3 3 3	89 55 7209  18 70 97 62 76 63 64 65 76  68 	1	51 19 11 13 113 20 21 28 95 24 36 22 23 48 51 27 24 5 5 5 5 5 5 5 12 13 3 4 5 5 5 13 13 13 13 13 14 15 16 16 17 18 18 18 18 18 18 18 18 18 18		98 1 98 1 5 1 63	55	916 17 98 124 829  247 525  881 692 685 465 522 613  888 810  532 342  334 73 454 19 32 40 6111 14 78 84 793 179 222 222 117 94 201 120 60 164 72 92 331 64 73 45 107 324 436 436 436 436 436 436 436 43	23 2 78 30 26 31 11 30 26 31 11 12 8 33 4 37 4 37 4 38 37 4 38 37 4 38 37 4 38 37 4 38 37 38 38 38 38 38 38 38 38 38 38 38 38 38	1	I	6 2 2 24 3 3 9 3 2 1 8 3 7 2 2 2 2 12 12 14 4 1 4 5 14 5 14 5 17	I I I I I I I I I I I I I I I I I I I	53 21 5 833 98 107 32 14 56 123 39 167 40 17 4 120 14 101 29 23 278 46 7 24 8 8 69 21 73 18 53 95 18 53 95 18 53 95 18 19 10 10 10 10 10 10 10 10 10 10	I I I I I I I I I I I I I I I I I I I	9 3 1 2 274 274 13 4 12 9 8 26 21 2 9 14 4 5 8 6 5 19 17 69 3 3 8 2 3 1 12 4 8 7 3 4 3 1 2 10 2 10 7	3	3,455 151 288 473 17,170 1,695 496 1,952 2,213 2,454 1,762 1,342 2,163 1,795 4 2,897 2,204 2,582 320 1,932 1,435 1,991 1,152 143 1,185 1,991 1,152 143 1,185 1,991 1,152 143 1,185 1,991 1,172 143 1,185 1,991 1,172 143 1,185 1,991 1,172 143 1,185 1,991 1,172 143 1,185 1,991 1,172 143 1,185 1,991 1,172 1,098 32 2,164 292 881 870 198 252 788 391 717 45 698 982 357 516 266 213 641 413 2652 1,501 1,045 720 654 1,914 350 324	349 3 7 15 1,912 57 20 121 1599 98 120 93 114 86 237 93 222 19 239, 69 143 49 9 49 5 376 65 14 82 108 14 54 52 7 12 31 8 39 20 58 9 20 4 5 35 37 9 31 8 22 33 61 45 64 58 108 115 10	758 33 43 98 3,146 120 27 439 316 426 329 157 411 283 372 562 574 35 114 265 354 228 15 258 10 1,318 53 31 124 2186 52 78 11 286 34 99 5 243 46 57 80 40 57 80 80 80 80 80 80 80 80 80 80 80 80 80	10 1 3 111 1 3 6 18 4 13 8 12 9 21 21 4 1 2 3 8 19 10 21 21 4 21
		519 1,506 175	12 17 3	317 585 41	4	121 110 12	5	2,523 12,22 <b>0</b> 570	381 19	25 9 3	5	53 82 3	6	364 1,547 924	1 2 3	89 277 284	3 15 13	29,046 47,494 5,331	2,523 3,023 256	4,272 8,953 454	125 178 3
		2,200 2,130 2,259	32 26 22	943 966 986	4 4 2	243 470 249	6 6 8	15,313 14,475 15,137	<b>524</b> 489 491	36 35 27	7 5 4	138 151 141	16 21 12	2,835 2,765 2,683	5 4 2	650 626 584	31 55 33	81,871 77,519 71,080	5,802 5,779 4,008	13,679 12,821 13,471	

STATE
Showing the diseases of the Out-door patients treated in the State-Public, Local Fund,

	en-	1	Secretary & Secretary Commission							•		Infed	ctiv
District.	Class of Dispensary.	© Cholera.	Dysentery.	(G) Enteric fever.	9 Gonorrhæa.	Kala Azar.	® Leprosy.	6 Malaria.	o Plague.	Pneumonia.	Pyrexia of un-	Rheumatic  Forer and  Rheumatism.	Serial Number.
<b>A</b> k <b>y</b> ab	III	165	716	4	561	•••	•••	11,938	•••	63	239	1,788	
Paletwa Kyaukpyu Sandoway Rangoon Town Insein Hanthawaddy Pegu Tharrawaddy Prome Ma•ubin Pyapôn Myaungmya Bassein Henzada Amherst Tavoy Mergui Toungoo Thatôn Salween Thayetmyo Mandalay Myitkyina Putao Katha Ruby Mines Katha Ruby Mines Shwebo Sagaing Lower Chindwin Upper Chindwin Upper Chindwin Pakôkku Minbu Magwe Magwe Magwe Kyauksè Meiktila Yamèthin		165 6 	54 87 230 1,985 243 183 819 5490 1,058 615 438 808 921 37 686 705 144 696 14227 353 803 480 82 432 95 683 117 140 330 666 506 78 260 323 63 644 94 94 162 883 95 1686 76	3 16 2 6 1 3 13 2 8 11 1 5 2 8 3 4 14 3	36 135 166 2,037 16 154 546 21 393 967 309 309 305 556 2754 510 4397 97 989  344 234 30 338 218 219 104 117 143 438 318 40 40 40 40 40 40 40 40 40 40		1 3 20 19 12 12 8 1 1 1 1 2 1 5 9 13 1 4 2 2 9 4 4 4 2 8 256 1 3 2 2 2 2 3 7	1,120 3,143 4,214 3,305 195 3,575 5,696 330 4,054 10,215 10,457 2,374 8,035 6,738 14,006 21 1,758 12 1,450 2,350 5,668 1,751 2,241 3,904 2,051 7,496 1,524 5,084 5,044 2,423 10,527 1,706 5,886 4,408 1,480 2,033 1,265 785 712 717 11,930 2,650 354 43 3,932 1,673 257 1,141 134 1,291 1,479 2,535 2,548	7 7 1 1 9 8 33 2 36 43 5 22 14 9 5 11 21 8 40 33 23	5 2 39 173 58 1 40 22 28 4 5 13 43 132 60 40 3 3 12 3 8 30 3 11 12 7 5 1 23 5 19 10 127 5 5 1 14 38 13 13 13 13 13 13 13 13 13 13 13 13 13	11 619 1,293 3,517 167 1 963  781 545 7,405 228 217 483 980 1,075 1,856 357 208  927 1,377 29  155 782  190 173 1,108 449 428 41  190 476  190 476  190 190 190 190 190 190 190 190 190 190	67 258 426 2,828 79 300 1,644 10 1,269 1,271 631 1,164 758 1,245 46 770 985 6 972 6 443 657 1,071 697 51 361 99 1,644 469 263 211 26 1,215 364 467 172 39 124 649 524 467 172 39 161 913 489 233 197 167 129 163 179 163 179 163 179 179 179 179 179 179 179 179	10 12 13 14 15 15 15 15 15 15 15 15 15 15 15 15 15
Myingyan	Z IIÎ		84 286 128	 I	31 182 171	•••	 5 2	293 731 5,440	46	7 46	13 <b>7</b> 499 48	94 295 183	59 59 60
Northern Shan States	{ IV	•••	178	<sub>I</sub>	243 507	•••	3 6	5,557 14,583	14	50	52 128	30 <b>I</b> 810	6:
Southern Shan States Chin Hills	iv I	r	102	4	116		2	11,721	•••	6 4	95 43	359 37 <b>7</b>	6
Total for the Province	{ III IV	75 512 3	6,274 13:554 1,062	33 134 191	5,157 10,354 665	•••	50 126 280	89,574 128,757 23,089	90 417 23	510 767 137	10,286	9,934 22,2 <b>8</b> 3 1,465	
GRAND TOTAL	1919 1918 1917	472	20, <b>8</b> 90 18,568 1 <b>7,92</b> 6	35 <sup>8</sup> 173 284	16,176 16,047 17,355	 6 42	456 394 509	241,420 223,914 213,465	530 701 502	1,414 1,890 1,137	28,974 27,621 24,200	33,682 34,381 37,115	

MENT C (II).

and Private-aided hospitals and dispensaries of Burma during the year 1919 (Paragraphs 15).

Dise	ases.						Other	Gener	al Dise	ases.		· System	mic Disease	S.
Serial Number.	(14) Small-pox.	Syphilis (Primary and Secondary).	Tubercle of the lung.	Other tubercu-	All other infective diseases.	6 Anæmia.	Diabetes.	(21) Scurvy.	Cco Non- Gromalig- nant.		All other gene-	Diseases of the	Diseases of the eye.	Diseases, of the ear.
1 2 3 4 5 6 7 8 9 10 11 2 13 14 15 6 17 8 19 20 1 2 2 2 3 2 4 2 5 6 2 7 8 2 9 3 0 1 1 2 2 2 3 3 4 3 5 6 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	1	591 471 324 2,544 191 74 592 1 199 879 879 879 879 879 879 879 8	40 3 32 307 61 30 19 37 17 16 20 23 21 49 45 43 21 1 52  15 15 16 20 21 10 10 10 10 10 10 10 10 10 1	35 8 156 26 5 9 8 18 1 54 11 14 33 20 16 31 4 9 5 26 17 5 3 6 1 1 1 2 2 7 5 3 6 1 1 1 2 2 7 5 3 6 1 1 1 2 2 7 5 3 6 1 1 1 2 2 7 5 3 6 1 1 1 2 2 7 5 3 6 1 1 1 2 2 7 5 3 6 1 1 1 2 2 7 5 3 6 1 1 1 2 2 7 5 3 6 1 1 1 2 2 7 5 3 6 1 1 1 2 2 7 5 3 6 1 1 1 2 2 7 5 3 6 1 1 1 2 2 7 5 3 6 1 1 1 2 5 1 1 2 2 7 5 3 6 1 1 1 2 5 1 2 5 1 2	252 3 2 158 945  55 90  194 274 147 84 326 44 200 564 472 38 50 237 522 379 144  179 38 673 1,086 109 242 26 1,061 70 13 47 23 47 24 26 1,061 70 13 47 24 26 1,061 70 13 47 24 26 1,061 70 1,061 70 1,061	767 47 113 519 1,929 2,219 137 398 51 540 405 209 568 270 528 294 630 593 16 687 20 125 152 593 246 33 343 1,166 32 242 550 42 934 934 932 318 37 20 310 32 32 32 32 32 32 32 32 32 32 32 32 32	25 3 3 16 3 2 6 5 3 1 4 5 6 5 6 5 6 5 1 1 2 4 3	I I I I I I I I I I I I I I I I I I I	24 II 7 236 5 II 7 236 5 II 13 28 22 I6 8 24 I4 I9 I3 45 2 16 8 7 3 II 6 27 4 5 13 II 6 27 4 5 II 6 1 388	13 1 2 72 3! 4 4 4 16 2 7 12 17 24 2 18 2 1 2 1 1 2 1 1 2 1 1 2 1 1 1 2 1 1 1 1 2 1	26 4 204 3 453 30 10 70 12 300 1 10 19 39 77 29 60 60 15 89 28 1,136 113 22 2 183 1 358 1 61 366 2 967 51 4 3 55 1 1 13 47 23 10 32 55 55	1,128 26 123 257 2,264 108 276 673 990 1,325 462 379 501 535 89 952 1,217 3 577 22 9 223 363 288 66 426 245 824 106 284 263 36 1,031 91 492 301 36 174 524 792 293 101 130 1011 316 282 110 145 122 183 182 142 64 210 420 745 76 382 312 411 1,368 607 192	1,373 93 256 901 4,341 160 424 1,494 21 943 2,486 5,566 1,236 977 883 153 823 2,463 14 1,116 214 304 659 941 965 61 6,021 1,579 4,529 2,111 1,286 692 143 3,231 50 5,005 822 1,127 1,141 3,293 7,683 5,076 2,060 3,461 5,836 3,520 1,006 1,044 462 1,310 1,178 1,284 493 1,330 2,322 1,968 3,074 469 1,627 430 991 1,112 390 181	1,196 92 222 453 5,511 255 325 2,194 7 1,662 2,852 1,935 1,750 1,067 1,136 785 1,354 2,427 21,390 33 562 357 1,647 1,599 88 1,041 635 1,766 132 230 481 33 865 31 748 239 481 33 865 31 748 239 780 91 601 905 241 504 99 144 531 411 208 169 135 457 599 144 531 411 208 169 135 457 599 1,233 42 605 188 358 560 161 221 13,077
	34 68 28	5,978 12,852 940	743 1,199	305 56	4.5‡7 5.789 1, <b>5</b> 13	10,433	47 241 12	80	397	130	2,177 2,813 54	14,661	5 <b>7</b> ,50 <b>5</b> 6,67 <b>3</b>	13,977 33,040 1,294
-	130 61 140	19,770 19,641 19,129	2,494 3,230 3,113	602 527 614	11,849 39,887 2,520	26,168 26,185 25,461	300 271 313	86 83 129	815 850 1,150	278 278 334	5,044 6,338 7,117	26,285 27,442 29,491	108,504	48,311 47,078 48,419

STATE
Showing the diseases of the Out-door patients treated in the State-Public, Local

Print Testing garage-contract of resident intervals or their contract, and a		en-										Syste	mic
District (1)		Class of Dispensary.	n Diseases of the so nose.	Diseases of the circulatory system.	Diseases of the system.	🖒 Dyspepsia.	(35) Diarrhæa.	S Abscess of the liver.	All other dis-	()	Seases of the edgestive system.	Inflammation So and suppura- Letion of lymph glands.	Serial Number.
Akyab Paletwa Kyaukpyu Sandoway Rangoon Town Insein Hanthawaddy Pegu Tharrawaddy Prome Ma-ubin Pyapôn Myaungmya Bassein Henzada Amherst Tavoy Mergui Toungoo Thatôn Salween Thayetmyo		III	53 26 2 34 531 9 27 64  73 165 25 70 66 141 151 153  78 7 5 41 88 24 29 46	36  9 136 264 95 5 25 24 91 7 <sup>1</sup> 30 110 3 <sup>2</sup> 8 668 113 2 59 9	3,581 308 1,483 3,774 9,792 2,287 755 2,910 84 2,553 4,950 2,635 2,399 2,052 3,155 997 2,646 5,143 62 3,751 96 1,226 1,679 3,730 1,954 247 2,679	3,520 192 1,031 2,352 3,411 965 525 2,174 23 808 2,635 1,640 1,206 1,526 1,674 596 1,613 4,271 22 1,777 3 535 1,125 1,476 1,272 129 1,620	1,081 82 211 447 1,000 347 324 430 11 512 1,495 501 597 719 1,417 123 1,016 1,116 7 906 23 358 373 695 442 53 508	15 1	105 14 11 91 354 14 38 16 73 32 11 66 111 2 98 47 25 5 10 95	2	21,209 938 4,131 9,726 22,020 4,646 4,566 11,406 141 8,230 40,488 6,531 16,297 10,657 10,121 2,937 9,850 25,200 121 8,211 269 3,463 5,398 8,156 7,484 775 6,172	390 8 83 218 1,482 46 265 13 481 523 260 303 295 236 66 693 437 240 3  240 3  72 111 356 24 198	11 22 33 44 55 66 77 88 89 100 111 122 133 144 155 160 177 188 199 200 211 222 222 222 222 222 222 222 222
Mandalay Bhamo	{	I III IV I III	18 88 22 8 12	49 30 241 17 <sup>2</sup> 2 28	2,079 1,5 <b>6</b> 2 5,580 8 <b>5</b> 9 2,94 <b>7</b> 2,052	505 2,248 113 587 1,110	439 1,123 477 336 449	136	38 371 170 8 44	69 	2,272 8,846 1,641 3,825 3,009	86 412 414 47 151	20 30 33 33
Myitkyina Putao Katha Ruby Mines	··· ···	IV I I I	3 60 41	9 51  19 26	6,016 998 3,025	51 2,354 295 1,337 442	45 <sup>2</sup> 851 122 423 274	  6 8	56 44 172 29	•••	13,978 1,497 13,465 2,655	5 139 5 152 34	3, 3, 3, 3
Shwebo	{	IV I III	3 28 10	28 39 1	489 936 1,070	166 553 892	47 222 203	 I	55 10		445 1,941 1,651	33 92	3 4
Sagaing	}	III	13	12	2,638 2,803	513	482 259 85	•••	31 97	•••	5,120	64 61	4
Lower Chindwin Upper Chindwin	{	III	10 208	33	1,254	388 4,897	186	3	5 23 97	4	1,474 1,183 15,471	45 157	4
Pakôkku	{	IIII	67 27 2	14	3,308	1,150 435 183	704 213 69		14		3,9 <sup>2</sup> 5 1,65 <sup>2</sup> 541	140	
Minbu	}	III-	26 16	9	726 1,439	782 854	34 269	··· I	8 15	•••	847	40 75	1 4
Magwe	{	III	25 7	8		1,051	383 136	•	47 5		1,560 1,783 877	75 15 166	2000
Kyauksè Meiktila Yamèthin	{ 	I III I III	7 1 23 15	2 10	342 1,237 1,428	171 614 647 2,687	46 96 357 415	•••	12 1 24 45	 I	396 899 2,292 6,078	13	, m / m / m /
Myingyan	{	III	17	17	640 1,651	372	8 <sub>5</sub>		76		1,435	2I 127	
Northern Shan States	{	IV	32 280	22	2,657	510 1,320 3, <b>6</b> 06	184 431 973	•••	32 17 201		3,030 2,836 <b>5</b> ,563	12 90 169	
Southern Shan States Chin Hills	}	IV	7 57	35 46 18	2,439	4,334	143 253	•••	28 26		1,179 8,249	79 95	
Total for the Province	{	I III IV	1,568 1,525 84	1,895	55, <b>0</b> 73 74,594	25,388	9,676	30	1,255 1,710 282	96 96	115,927 252,679	2,927	
GRAND TOTAL	{	1919 1918 1917	3,177 3,094 3,947	2,927 2,823 2,673		81,107	28,572	87	3, <sup>24</sup> 7 2,783 2,898	110 141 85	403,453	10,210 11,052 10,636	

MENT C (II).

Fund, and Private-aided hospitals and dispensaries of Burma during the year 1919—concluded.

Dise	ases—co	onclude	ed.							,	Genera	al and	Local.	S. S.	
Serial Number	(8) Goitre.	Bright's dis-	All other dis-  eases of the urinary system	Hydrocele.	Other diseases  of the generative system.	Diseases of the organs of locomotion.	Diseases of the connective tissue.	(5) Ulcers.	Other diseases of the skin.	All other local diseases.	A Injuries (Gene-	Poise (49)	S By other guino poisons.	G Total number of out-door patients.	© Operations.
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 6 17 8 9 10 11 12 13 14 15 15 15 15 15 15 15 15 15 15 15 15 15	55 1 55 11 12 4 18 4 3 24 + 4 3 37 1 24 1,657 297 183 2,763 1 7 58 2 1,657 297 183 2,763 1 7 58 2 1,152 1,491 3 6 2 131 100 358 1 327 7,967 450 304 8,721 9,703 10,216	26 1 9 4 134 58 10 16 26 15 10 11 13 47 22 39 13 7 22 4 7 1 9 16 20 2 3 24 20 6 23 31 4 33 15 9 22 7 31 365 103 77 917	270 12 230 100 595 242 18 217 257 280 270 326 155 288 393 473 527 236 100 99 132 9189 555 17 60 99 132 9189 555 189 190 144 48 163 119 93 29 189 558 203 68 114 99 32 132 87 815 130 93 114 93 12 2,226 5,586 642 8,454 8,839 9,280		283 23 92 188 4,501 1,660 768 368 54,501 1,660 768 802 240 488 860 508 802 278 531 492 183 492 183 322 960 952 316 69 323 10 544 18 218 221 221 221 221 221 221 221 221	5,527 628 10,227 11,914	36,512	4,523 2,61 2,086 5,421 1,84 9,91 4,674 1,13 3,858 3,813 3,901 4,109 3,558 8,550 4,109 2,759 2,759 2,759 2,759 2,759 2,759 2,766 3,465 1,148 2,297 2,939 2,759 2,766 3,463 1,278 1,721 1,453 3,863 929 526 692 1,442 2,863 929 1,422 1,369 1,369 1,369 1,369 1,369 1,369 1,369 1,409 1,097 1,102 1,097 1,102 1,097 1,102 1,097 1,102 1,097 1,102 1,097 1,102 1,097 1,102 1,097 1,102 1,097 1,102 1,097 1,102 1,097 1,102 1,097 1,102 1,097 1,097 1,102 1,097 1,097 1,102 1,097 1,097 1,102 1,097	96,771	149 8 30 833 94 141 145 37 748 100 136 31 175 10 119 45 13 18 8 139 2 8 336 7 80 45 28 30 37 126 143 104 9 56 2 11 15 33 144 41 141 1,830 2,249 192 4,271 4,660 5,220	3,583 211 785 2,079 11,097 55 1,416 3,854 74 2,593 8,416 2,566 3,698 2,606 3,300 5,11 5,578 5,113 3,154 35 1,330 1,317 2,301 3,598 2,255 899 5,894 576 548 872 1,42 2,284 2,284 1,640 450 5,75 1,237 947 710 3,009 301 467 1,943 2,294 734 1,640 450 5,75 1,237 947 710 3,009 301 467 1,943 2,294 734 1,640 450 5,75 1,237 947 710 3,909 31,040 77,757 3,909 112,706 110,675 120,964	2		80,743 4,791 18,275 33,723 116,451 15,036 16,967 50,397 990 37,198 101,661 43,388 45,286 42,121 44,952 10,672 45,259 84,368 474 39,471 1,305 13,492 22,303 36,677 29,795 5,092 35,032 14,873 61,083 13,749 23,514 20,441 4,989 60,626 7,830 41,923 16,610 5,225 11,190 14,671 28,741 23,055 6,898 10,984 67,296 25,454 11,801 3,904 9,714 15,471 10,810 10,374 8,892 5,308 10,984 67,296 25,454 11,801 3,904 9,714 15,471 10,810 10,374 8,892 5,308 10,490 17,098 34,973 5,798 25,454 11,801 3,904 9,714 15,471 10,810 10,374 8,892 5,308 10,490 17,098 34,973 5,308 10,490 17,098 34,973 5,308 10,490 17,098 34,973 5,308 10,490 17,098 34,973 5,308 10,490 17,098 34,973 5,308 10,490 17,098 34,973 5,308 10,490 17,098 34,973 5,495 17,4384 17,96,449	1,607 93 301 488 4,837 138 325 1,501 1,338 2,151 1,069 1,000 1,178 970 770 1,676 1,462 4 1,323 21 308 614 979 759 50 868 247 1,744 13 178 275 82 772 39 491 390 138 145 263 692 312 114 335 679 286 332 107 132 338 145 263 692 3112 114 335 679 286 332 107 132 338 145 263 692 312 114 335 679 286 332 107 132 338 1445 267 487 913 83 553 184 432 908 97 142  12,157 25,488 1,220  38,865 38,787 42,677

# STATEMENT D (I).

Showing the diseases, etc., of the in-door patients treated in the State-Special and Railway Hospitals and dispensaries of Burma during the year 1919 (Paragraphs 5, 17 and 18).

		}		Poli	ce.					./				
	Diseases.	,	Polic Patien		Civ		Cana	ls.	Oth	ers.	Tota		Railwa	ys.
Class.	Name.		Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
(1)	(2)		(3)	(4)	(3)a	(4)a	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12),
No. of Beds.	Males Females	•••	1,26	50		12 11	•••			•	1,2	76 11	88 4	
INFECTIVE DISEASES.	Cholera  Dysentery  Enteric fever  Gonorrhœa  Kala Azar  Leprosy  Malaria  Plague  Pneumonia  Pyrexia of uncertain origin  Rheumatic fever and Rheuma  Small-pox  Syphilis (Primary and Secon  Tubercle of the lung  Other tubercular diseases  All other infective diseases		20 47,78 47,140  49,194 10,178 1,300 421 29 293 51 13 843	12 16 11  39 3 42 18 1 1 2 9 3 21	30S  30S  4 9 14  6 2	4 2 1			I I	I	21 794 47 144  4 9,503 10 183 1,309 435 29 299 53 13 930	13 16 11  44 3 44 18 2 1 3 9 3 29	8 64 0 24  156 3 52 17 22 13 35 12 4 74	3 4 1 1 2 17 1 1 2 14
OTHER GENERAL DISEASES.	Anæmia ( Diabetes Scurvy New growth { Non malignan Malignant All other general diseases	t	274 2 2 2 5 1 98	3	6	2	•••	•••			280 2 2 2 5 1	5	13 1  1 	4
	Diseases of the nervous system. Diseases of the eye Diseases of the ear Diseases of the nose Diseases of the circulatory sy All diseases of the respirate except Pneumonia and tub lungs.	stem	279 246 53 29 51 747	2	5 1 18		•••			•••	290 . 251 53 29 52 765	3 2 4	14 4   2 32	 I I
SYSTEMIC DISEASES.	Dyspepsia Diarrhœa Abscess of the liver All other diseases of the liver Appendicitis All other diseases of the dige Inflammation and suppuration	stive sys <b>t</b> em	37 463 65	2 6  1  3	3  18			• • • • • • • • • • • • • • • • • • • •			234 306 / 3 40 5 481 65	2 6  1 	8 25  4 1 41 20	3  1
SYS	glands. Goitre Bright's disease All other diseases of the urin Hydrocele Other diseases of the genera Diseases of the organs of loca Diseases of the connective tis Ulcers Other diseases of the skin All other local diseases	ative system omotion sues	142		3 4 8 7 4	I		•••			1 4 21 23 145 180 418 511 321		 2 7 10 2 3 27 24 4 2	I
GENERAL & LOCAL.	Injuries (general and local) Poisoning by Opium Other poison	  ns ,.		4  I	I	•••					1,078	1	316	17
	Labour {Normal	• • • • • • • • • • • • • • • • • • • •	1		13	i	3				16		42 22	•••
	Tetal number of in-door pat	ients { 191	9 18,91 8 20,48 7 15,37	7 342	436	20	3 2 6		1 70	2	19,515 20,935 16,047	362	1,152 1,373 1,119	
	Operations	{ 191	8 447		8		700		•••	•••	570 455 <b>6</b> 13		214 146 146	6

### STATEMENT D (II).

Showing the diseases of the out-door patients treated in the State-Special and Railway Dispensaries of Burma during the year 1919 (Paragraphs 5, 17 and 18).

	•		Pol	ice.		•		
Class.	Name of Diseases.	• -	Police Patients.	Civil Patients.	Canals.	Others.	Total.	Railways.
(r)	(2)		(3)	(4)	(5)	(6)	(7)	(8)
No. or Beds.	Males			•••	•••		•••	
INFECTIVE DISEASES.	Cholera		2 1,103 2 230  20,692  7 3.275 2,167  256 8 9 428	2 164  104  2,457  12 286 260 3 151 5	51 68 1,180 1 31 164 72 11	33  935  4 123  42	4 1,320 2 435  25,264  20 3,596 2,714 3 521 24 9 712	63 2,684 24 903 14,463 36 206 2,431 3,225 38 952 40 26 3,947
OTHER GENERAL DISEASES.,	Anæmia Diabetes Scurvy New growth { Non-malignant Malignant All other general diseases		1,084 3 1 6 1 469	3 1 1 80	20   I  78	   I	1,220 3 4 8 2 628	1,853 20 23 9 8 2,995
	Diseases of the nervous system Diseases of the eye Diseases of the ear Diseases of the nose Diseases of the circulatory system All diseases of the respiratory system except Pneumonia and tubercle of	  tem the	3,240 1,232 885 260 114 14,283	288 754 92 23 9	80 126 91 7 8 256	167 34 6  545	3,775 2,146 1,074 290 131 16,556	2,125 3,686 2,850 137 547 12,188
SYSTEMIC DISEASES.	lungs. Dyspepsia Diarrhœa Abscess of the liver All other diseases of the liver Appendicitis All other diseases of the digestive sys	stem	4,383 1,514 17 130  11,198 231	485 284  13 2 2,089 40	144 82  11  1,228 20	120 18 1  266	5,141 1,898 18 154 2 14,781 292	2,856 2,601 5 252 2 19,694 580
SYSTE	glands. Goitre	tem	18 1 212 7 151 1,902 1,302 7,060 3,353 293	50 4 38 1 79 106 196 920 732 36	 15  80 1 92 1,161 566 2	9 25 526 376 9	69 5 26 <b>5</b> 8 310 2,018 1,615 9,6 <b>6</b> 7 5,027 <b>34</b> 0	9 39 50 <b>6</b> 57 876 366 1,621 6,347 7,791 623
GENERAL & LOCAL.	Injuries (general and local) Poisons Opium Other poisons	•••	7,044	635	347	224	8,250 <sub>26</sub>	<sup>8,556</sup>
	Total {	1919 1918 1917	88,599 59,664 76,781	12,274 13,004 18,00 <b>6</b>	5,994 5,753 4,625	3,480 5,173 7,500	1,10,347 1,13,594 1,06,912	1,08,354 1,18,442 1,12,460
	Operations	1919 1918 1917	497 570 543	111 123 175	135 106 84	3 11 120	746 810 922	3,783 3,495 4,213

STATE

Showing the diseases of the in-door and out-door patients treated in the

Ni

STATE

Number of in-door and out-door patients, according to class and sex, treated in the State-Public

				Euro	PEANS AND	ANGLO-IN	DIANS.		HINDU	s.		er.
Die	trict.		of Sary.	Adu	lts.	. Chila	Iren.	Adu	elts.	Childr	en.	Number.
Dis	uricu.		Class of dispensary.	Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.	Serial N
	(1)		(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	Ser
Akyab Paletwa Kyaukpyu Sandoway Rangoon Tow Insein Hanthawaddy Pegu Tharrawaddy Prome Ma-ubin Pyapôn Myaungmya Bassein Henzada	 /n  /(Syriam) 	··· ··· ··· ··· ··· ··· ··· ···	III	559 57 57 89 3,676 13 23 390 5 242 234 91 70 94 142  425 217	189 16 59 2,890 422 3 217 1 100 110 24 22 40 62 326 14 94	177 7 2 34 776  4 183 8 93 59 8 18 30 52 300 4 39	28 1 57 1,113 144 122 67 59 10 7 21 40 261	10,249 837 1,332 3,230 48,804 61 2,277 12,999 164 9,022 9,722 4,908 4,272 9,012 7,114 7,990 6,596	1442 277 111 8,626 2 644 127 958 1,358 83) 473 287 766 287 211 171 596	783 1,030 296 291 601 184 106 228	313 153 26 64 3,403 1,022 70 331  556 812 233 147 378 100 85 103 307	3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18
Amherst  Favoy Mergui Foungoo Fhatôn Salween Fhayetmyo  Mandalay	•••	{ :::	I III IV III III III III III III	 530  151 291 413 107 46 184 6	409 42 25 47 .446 43 2 43 638	11 152 34 32 71 130 21 16 22 286 552	45 7 138 45 14 27 145 12 3 57 312 682	32 2,604 3,549 7,369 4,691 1,144 2,543 361	102 1,474 276 338 200 1,170 6!4 170 426 1,202 3,296	969 . 68 . 186 . 177 . 827 . 429 . 146 . 428 . 610	30 734 83 105 88 605 211 120 279 568	19 20 21 22 23 24 25 26 27 28
Bhamo	•••	* (	IV I III IV	7 160 304	4 26 88	61 90	4 40 <b>6</b> 2	46 1,013 2,216 109	4 100 436 6	54 37+ 7	1 92 181 3	30 31 32 33
Myitkyina Putao Katha	•••		I I I	609 43 500 421	177  117 197	92 4 141 68	87 7 66	7,592 1,232 3,614 2,828	1,635 155 424 712	1,524 69 288 618	1,112 90 203 437	34 35 36 37
Ruby Mines Shwebo		\ \{\	IV I III	33 29 220	33 12 190	7 21 <b>61</b>	8 7	580 1,400 2,010	95 333	59 3 <sup>2</sup> 7 262	53 218 247	38 39
Sagaing		{	I	53 141	10 69	55	59	1,030	337 233 205	178 247	114	40 41 42
Lower Chindw Upper Chind Pakôkhu		· · · · ·	III I I III IV	31 81 360 51 181	33 73 10 65 53	16 56  54 35	34 14 49 2 21 13	718 6,732 731 865 891	12 98 1,109 104 102 41	19 122 864 139 101 42	25 38 451 144 66 31	43 44 45 46 47 48
Minbu	•••	{	III	32 99	38 16	35 29	1 5	1,064 1,590	8 <sub>2</sub> 271	112 324	54 181	49 50
Magw <b>e</b>	•••	{	I III IV	35 110 16	48 7 13	41 46 7	26 6 10	1,266 5,4 2,745 578	250 63 112 35	273 72 91 47	66 71 37	51 52 53 54
Kyauksè Meiktila Yamèthin	•••	.:.	III	60 244 287	3 105 121	8 73 84	9 96 68	868 2,582 4,300 52.	97 338 658	105 254 623	84 137 409	54 55 56 57 58
Myingyan Northern Sha	 in States			179 94 151	69 36 21	33 6	46 2 4	3,694 3,339 2,401	510 496 163	489 439 205	301 209 80	59 60 61
Southern Sha Chin Hills		<b>\</b>	I IV I	432 7 25	284	168	107	8,231 654 779	1,604 121 183	1,578	957 105 170	62 63 64
Total for	the Provin	nce {	I III IV	7,005 7,7 <b>52</b> 436	5,004 3,752 588	2,184 2,117 <b>1</b> 32	2,366 1,923 228	95,50 <b>5</b> 151,982 . 7,519	18,400 16,921 3,462	12,293 12,829 573	8,931 8,531 1,458	65 66 67
GRAN	D TOTAL		1919 1918 1917	15,193 16,060 16,378	9,344 10,996 <b>10,0</b> 06	4,433 4,813 5,028	4,517 4,660 <b>4,29</b> 9	255,006 236,924 22 <b>9,49</b> 8	38,428 38,428 <b>35,98</b> 6	25,695 24,942 <b>24,235</b>	18,920 16,610 16,602	68 69 70

MENT E.

Private non-aided hospitals and dispensaries of Burma during the year 1919 (Paragraph 19).

MENT F.

Local Fund, and Private-aided hospitals and dispensaries of Burma during the year 1919 (Paragraph 20).

Locar		Маног	MEDANS.			Burm	ESE.			Оті	HERS.		
umber.	Ad	ults.	Chile	dren.	Adu	elts.	Chile	dren.	Adi	ults.	Chil	dren.	Tota!
Z	Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.	Male.	Female.	treated.
Serial	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	(19)	(20)	(21)	(22)	(23)
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 6 17 18 19 20 1 22 23 24 25 6 27 28 29 30 1 32 33 34 55 6 57 8 59 60 61 62 63 64 64 65 65 65 66 66 66 66 66 66 66 66 66 66	(11)  25,305 141 2,566 3,921 17,834 7 1,146 4,689 38 2,785 5,466 2,379 2,857 4,056 4,425 7,431 4,201 7,473 1,501 2,080 3,275 2,423 854 2,332 227 7,342 25 3,622 141 2,140 834 262 668 1,068 756 1,447 106 579 5,136 140 903 259 379 1,146 941 376 1,128 450 707 2,501 3,519 60 1,886 811 2,923 3,625 125	(12)  3,864  1,546  1,311  2,803  1,700  117  478   248  640  271  303  218  325  354  397  882  66  1,538  110  388  392  601  317  18  503  833  1,551  6  22  339  8  518  4  229  256  25  78  151  44  310   29  563  4  108  16  34  135  176  177  78  96  172  352  579   249  75  157  612  68  4	(13)  5,586  5,420 1,081 1,446 160 534 270 880 313 514 261 324 304 435 828 39 1,348 23 169 295 583 338 56 552 628 865 6 12 315 4 723 232 131 338 124 187 392 131 339 124 187 392 131 339 124 187 392 131 339 124 187 392 131 338 124 187 392 131 338 124 187 392 131 338 124 187 392 131 338 124 187 392 131 338 124 187 392 131 338 124 187 392 131 338 124 187 392 131 338 124 187 392 131 338 124 187 392 131 338 124 187 392 131 338 124 187 392 131 338 124 187 392 131 338 124 187 392 131 338 124 187 392 131 338 124 187 392 131 338 124 187 392 131 338 124 187 392 131	3,402 361 835 1,115 625 97 286 216 596 263 408 155 261 253 335 540. 27 965 37 161 145 558 176 23 450 484 661 3 21 182 16 399 125 133 9 65 70 76 185 1 20 414 9 75 17 20 88 16) 100 47 62 114 192 374 203 59 73 472 66 6	19,521 1,533 7,865 10,300 12,942 63 6,747 11,875 562 11,520 30,443 15,441 15,296 15,220 15,424 17,441 32,800 9,111 49 2,479 5,903 9,995 11,325 1,689 12,794 2,028 16,128 3,406 8,182 6,514 1,804 15,408 2,809 11,487 3,679 1,555 3,508 5,086 10,233 7,781 2,547 3,199 23,803 13,268 5,476 1,065 4,963 6,360 3,828 4,498 2,931 1,754 4,186 6,470 13,257 2,645 4,963 6,360 3,828 4,498 2,931 1,754 4,186 6,470 13,257 2,645 1,065 4,963 6,360 3,828 4,498 2,931 1,754 4,186 6,470 13,257 2,645 1,065 4,963 6,360 3,828 4,498 2,931 1,754 4,186 6,470 13,257 2,645 5,850 4,363 6,360 3,828 4,498 2,931 1,754 4,186 6,470 13,267 2,645 5,850 4,363 6,360 3,828 4,498 2,931 1,754 4,186 6,470 13,267 2,645 5,850 4,363 6,980 12,508 12,685 10,261	(16)  4,851 376 2,110 4,031 9,486 5,341 2,478 7,130 106 5,190 14,795 9,617 7,084 5,029 6,882 4,871 3,969 15,460 87 3,193 5,15 3,600 5,374 4,301 308 7,190 4,293 6,839 6,621 5,590 3,045 1,368 9,382 397 7,079 2,806 975 2,074 2,120 7,684 5,132 1,510 2,425 1,360 5,927 2,079 5,70 1,765 2,408 1,681 2,200 1,765 2,408 1,681 2,200 1,765 2,408 1,681 2,200 1,765 2,408 1,681 2,200 1,765 2,408 1,681 2,200 1,765 2,408 1,681 2,200 1,231 996 2,164 2,068 5,978 1,499 2,319 1,258 3,624 6,402 9,211 4,336	(17)  4,776 4,27 1,546 4,807 3,176 3 1,897 4,914 32 2,930 19,755 4,878 8,119 3,734 5,058 1,210 3,894 11,815 21 1,733 87 1,925 2,090 3,042 3,094 312 3,910 1,188 2,072 2,396 1,723 1,005 5,130 88 7,320 1,183 720 1,284	3,304 308 1,239 3,839 2,857 1,235 1,648 3,669 2,555 16,690 4,321 5,481 3,192 3,823 1,291 2,941 9,803 26 1,414 1,636 1,660 2,410 2,258 140 3,663 1,118 2,012	951 409 279 210 5,221 28 439 2,243 15 1,028 1,448 1,110 1,119 1,088 1,689  2,113 1,133  599 1,740 2,089 1,123 449 185 470 73 2,974 2,969 1,123 449 185 470 7,324 2,969 1,1991 430 345 352 167 413 40 336 1,737 49 380 72 194 216 291 129 243 114 206 361 1,072 129 243 114 206 361 1,072 129 243 114 206 361 1,072 129 243 114 206 361 1,072 129 243 114 206 361 1,072 129 243 114 206 361 1,072 129 243 114 206 361 1,072 129 243 114 206 361 1,072 129 243 114 206 361 1,072 129 243 114 206 361 1,072 129 243 149 243 244 245 246 257 267 278 298 298 298 298 298 298 298 29	(20)  66 14 17 24 1,662 2,334 21 235 188 130 165 126 124 196 541 88 251 2 69 64 280 501 301 33 1 137 76 823 20 1,619 335 7,686 37 183 118 22 104 71 30 104 61 283 4 71 26 21 84 61 283 110 384 21 110 384 21 110 384 21 110 384 21 110 384 21 110 384 21 110 384 21 110 384 21 110 384 21 110 384 21 110 384 21 110 384 21 110 384 21 110 384 21 110 384 21 110 384 21 110 384 21 39	(21)  92 70 19 11 970 1 34 293 165 288 154 116 179 238 289 110 233 84 14 101 281 145 77 435 161 302 240 79 375 28 96 126 47 49 62 3 93 156 136 22 23 27 25 40 35 123 77 121 129 183 30 55	(22)  33 23 4 12 702 1,088 19 138 95 119 95 91 86 121 274 60 159 48 30 84 252 156 28 113 49 332 103 219 140 39 304 14 65 66 8 30 23 55 94 8 30 16 37 21 83 3 12 20 35 88 9 55 48 151 25 50	84,198 4,942 18,563 34,196 133,621 16,731 17,463 52,349 990 39,411 104,115 45,150 46,628 44,284 46,747 10,676 48,156 86,572 474 42,153 1,625 15,424 23,738 38,668 30,947 5,235 30,217 15,057 66,702 14,873 23,851 21,539 5,021 62,790 8,122 42,804 17,480 5,423 11,442 15,459 29,132 23,772 6,943 11,682 68,278 25,811 12,317 4,170 9,927 16,112 11,223 10,639 9,584 5,501 11,225 18,040 36,474 5,599 18,927 15,548 21,766 48,123 25,760 20,872
65 <b>66</b>	41,881	7,142	5,98 <b>8</b> 18,251	4,125	160,456 340,135	93,341	47,411	42,601 91,0 <b>8</b> 6	35,255 30,607	7,290 4,691	3,030	2,273 2,548	602,481 1,099,827
67	5,20.4 158,452	26,280	457	893	30,538 531,129	29,456 273,2 <b>9</b> 5	165,072	6,464	70,457	2,695 14,67 <b>6</b>	<b>7,5</b> 63	6,190	1,807,261
69	158,452 152,853 154,519	26,389 26,074 25,761	24,696 25,716 25,778	17,300 16,817 17,147	503,671 465,607	261,434 252,763	167,060 169, <b>601</b>	143,820	132,796 168,997	36,967 55,768	18,526 25,824	12,736 18,468	1,851,903 1,867,529

	una aispensaries o	Buri	na au	ring i	ne yei	<i>(</i> / 191	9 (1 a	ragrap	11 21).			
Class of		patients from	tion	ber of o s perfor ng the	med year.	patients on in	3	ılt of op pati	eration ents.		patients at the year.	
operation.	Nature of operation.	Number of patients remaining from last year.	Prin- cipal.	Secon-	Total.	Number of operated columns 4 to	Cured.	Re- lieved.	Dis- charg- ed other-	Died.	Number of remaining close of the	Remarks.
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	wise.	(11)	(12)	(13)
Operations on tumours.	Removal {By excision Otherwise	4	400	2	402	400	380	<b>8</b> I	3	3	I	
	Total	4	403	2	405	403	391	9	3	3	I	
Operations on cysts.	Removal { By excision Otherwise	•••	300	•••	300	300 9	<b>2</b> 93 6	4 3	•••	· ·	3	
	Total	•••	300	•••	309	309	299	7			3	
Operations on abscess.	Acute abscess—Incision Chronic abscess—Incision and drainage.	161	1,590	92 26	21,076 1, <b>6</b> 16	20,984	20,676	339 45	22	16	92 28	
	Total	211	22,574	118	22,692	22,574	22,238	384	2.1	19	120	
Removal of foreign bodies.	By incision, forceps or other- wise.  Total		1,302		1,302	1,302	1,300	2	~~		•••	
boules.	l otal		1,302		1,302	1,302	1,300					
Operations on arteries. Operations (	Ligature Ligature of artery	0,00	16	2	18	16	16		• •	•••	٠	
for aneu- }	Eveloien of ano	•••	7	1		7	5	•••	••	2	•••	
rysm.	Takal				8				•••	2		
	lotai		7			7	5		• 0		***	
ĺ	Ligature Excision		3		. 3	3	3		• •	•••		
Operations on veins.	Infusion of saline or other fluid Injection of salvarsan or neo- salvarsan.		245 1,684	51 217	296 1,901	245 1,684	195	9 160	•••	41 1		
. [	Injection of spittles solution For varices—excision	7	2 <b>1</b> 7	26	243	217	208	16	• • •	•••		
	Total	16	2,160	294	2,454	<b>3,1</b> 60	1,947	185	• • •	42	2	
Operations for arrest of hæmorrhage.	Compression, direct or indirect Ligature of bleeding point or of artery on the proximal side.	··· I	47	3	47	47 138	47	• • •	•••	•••		•
	Total	1	185	3	188	185	181				5	
Operations on { lymphatics. {	Removal of lymphatic glands—  (a) By excision  (b) By curetting	3 <sup>2</sup> 5	1,173 479	16	1,189 480	1,173	1,145	17	1 3	1 1	31 5	
	Total	37	1,652	17	1,669	1,652	1,617	21	4	11	36	
Operations on { nerves.	Neurotomy Stretching of nerve Removal of nerve ganglion		6 1	•••	6	6	5 1	ı		• • •	• • • • • • • • • • • • • • • • • • • •	đ
	Total	•••	7	•••	7	7	6	ı	•••	•••		
Operations (	Removal of diseased nail		73		73	73	73		1			
on the skin   and subcu-{	cupping. Plastic operations for cicatrices	•	139		139	139	124	5			10	
taneous tissues.	and congenital malformations Skin grafting		33	6	39	33	25	•••	6	•	2	
	Total	• • •	245	6	251	245	222	5	, 6	•••	12	

	and dispensaries		· //// (0	uring	one ye	9	19-0					
Class of		patients from	tions duri	ber of a s perfor ng the y	med year.	f patients on in to 6.		ılt of op patio	ents.		patients at the year.	
operation.	Nature of operation.	Number of remaining last year.	Prin- cipal.	Secon-	Total.	umber of erated lumns 4	Cured.	Re-	Dis- charg- ed other-	Died.	Number of p remaining close of the y	Remarks.
(1)	(2)	(3)	(4 <b>)</b>	(5)	(6)	Z 5 3 (7)	(8)	(9)	wise. (10)	(11)	スピラ (12)	(13)
					•							
	Incision of periosteum Osteotomy Wiring or otherwise uniting recent or ununited fracture—fractures		89	•••	4	<sup>4</sup>	<sup>4</sup>	·	•••	···. 5		
Operations on bones.	Setting of fractured bones— Nasal Inferior maxillary Clavicle Scapula Humerus Radius and ulna Carpal, metacarpal and phalangeal.	3 13 2	12 26 138 7 175 524 71	  I	12 26 138 7 176 524 71	12 26 138 7 175 524 71	12 23 13 <b>6</b> 7 173 514 69	2 2 2 10 2	  2 2 1	· · · · · · · · · · · · · · · · · · ·	 I  3 10	•
	Ribs Ileum Patella Femur Tibia and fibula Tarsal, metatarsal and phalangeal.	3   4	50 1 9 95 133 4	 	51 9 95 133 4	50 I 9 95 133 4	50 I 8 77 I27 4	3  5 2 	 I	4 2	 8 6	
	Seat of fracture not specified Removal of sequestra Excision, partial or complete Removal of tubercular lesions	4 	21 247 11	9	21 256 11	21- 247 11	21 217 11	18	4	I	 	
	Total*	36	1,617	11	1,628	1,617	1,531	47	10	13	52	·
Operations on joints.	Reduction of dislocation— Temporo-maxillary Acromio-clavicular Sterno-clavicular Shoulder Elbow Radio ulnar Wrist Metacarpo-phalangeal Inter-phalangeal Hip Knee Ankle Metatarso-phalangeal Seat of dislocation not specified Passive movement For ankylosis Aspiration with or without injection. Incision with or without drainage. Excision, partial or complete		45 1 6 101 95 2 24 13 6 20 7 6 2 4 10 17 33		45 10 6 101 95 2 24 13 6 20 7 6 2 4 10 10 18 35 10	45 1 6 101 95 2 24 13 6 2 c 7 6 2 4 10 10 17 33	45 1 6 99 94 2 24 13 6 18 7 6 2 4 8 11 18	3 2 I I 5 I			       	
	Total	10	412	3	415	412	396	14	4	3	5	
Operations on muscles, tendons and fasciæ.	Myotomy Tenotomy Union of divided muscles and tendons. Division of cicatrical adhesions		4 2 14 <sup>2</sup> 27	•••	4 2 142 2;	4 2 142 27	4 2 136 27	i	 I	•••	4	
	Total	I	175		175	175	169	2	I		4	

	and dispensaries						19—c	ontinue	ed. 			
,		patients	tions	per of op perform ng the y	ned	patients on in to 6.	Resu	lt of op patie	erations ents.	on	patients at the year.	_
Class of operation.	Nature of operation.	Number of remaining last year.	Prin- cipal.	Secon- dary.	Total.	10 m +	Cured.	Re- lieved.	other-	Died.	Number of remaining close of the	Remarks.
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	wise.	(11)	(12)	(13)
	(a) For injury—											
	Shoulder Arm, upper third	•••	2 . 12		2 I 2	2 12	9	•••		1 2	I	
	Arm, middle third Arm, lower third		11		11 6	11	7 5			2 1		
	Elbow	•••	2 8	•••	2	2 8	2 8	•••		•••	•••	
	Forearm, upper third Forearm, middle third		9	***	9	9	8	•••	•••	•••	<sub>I</sub>	
	Forearm, lower third Wrist	1	9	•••	9	9	9	•••	•••	•••	I	
	Carpo-metacarpal	•••	6	•••	б	6 42	6	•••	•••	•••	•••	-
4	Metacarpo-phalangeal Thumb		42 8	•••	42 8	8	40		•••	•••		
	Inter-phalangeal Thigh, upper third	1	44	•••	44	44 3	42	2	•••	2	•••	
	Thigh, middle third	•	6	I	10	9	6	•••	<sub>I</sub>	I 2	2	
Amputations including	Thigh, lower third Knee	1	3	•••	3	3	3	•••	•••	I	ı	
disarticula-4	Leg, upper third Leg, middle third	т .	14	•••	14	14	13		•••	I	•••	
tions.	Leg, lower third		8	•••	8	8	5	I		2		
	Tarso-metatarsal		3	•••	3	3	3	•••	•••		•••	
	Metatarso-phalangeal Inter-phalangeal		24		25	5	24	•••	•••	•••	•••	
	(b) For disease—		ı		I	I				1		
	Arm	1	4		4	4	4			•••		
	Forearm Fingers		30	2	32	30	28	2	•••	•••	•••	
	Thigh		4	•••	4	4	2 I	•••		I		
	Leg		14		14	14	10	2			2	
	Foot	1	29	5	34	29	29		•••	•••		
	T-A-1		200	-			004				-	
	, Total	7	332	9	341	332	294	11	2	17	15	•
	Trephining or removing portion	s										
Operations on the	of skull— (a) For fractures	. 9	117	I	118	117	84	4	4	30	4	
skull.	(b) For Jacksonian Epilepsy Elevation of depressed bone		1		32	r		2			.,.	
'	Rievation of depressed bone	3		_	- 32	3.	25					•
	Total	. 12	150	I	151	150	110	6	4	36	6	•
'Operations	Paracentesis cerebral ventricles	•							•••		· · · ·	
on the	Removal of clots Intracranial hæmorrhage			•	2	2	•••		1	2	•••	
brain and meninges.	Excision of cortex Evacuation of intracranial absce	. ,			•••	•••	2	•••				
	Evacuation of intractamarabsce	SS			3	3		-			_	
	Total		_ 5		5	5	2		•••	3		•
Operations on the spine	Lumber puncture	•••	7		7			2		2	1	
and spinal cord.	Evacuation of intraspinal abscer	ss	•••	•••	***	•••		•••	•••	•••		
	Total		- 7		7	7	3	2		2		-
					-	-	- 3		-			-
Operations on the face.	Cheiloplasty		3		3	3		1				
on the face.	Rhinoplasty	•	48	3 2					• • • •	1	1	
	Tr. 1		_						-		-	
	Total	.,	53	6	59	53	49	2		I	1	

Nature of operation.	(13)
(a) On the eyelids—  For ectropion	
For extropion	•
Canthoplasty   For trachoma   9	•
the eye—  For strabismus   .	•
Tumour orbit	
Iritis after cataract	
Paracentesis        5        5       5       5	
For cataract extraction	
Peritomy	
Total 6 594 4 598 594 581 7 6 2 4	
For salivary calculus	
Division of fraenum of tongue 110 110 110	
For cleft palate 2 2 2 2	
Dental oper- { Extraction 26   14,695   26   14,721   14,695   14,721                 2   685   685   684   3	
Total 28 15,380 26 15,406 15,380 15,405 3	<b>\</b>
Removal of foreign bodies 29 29 29	
and accessory sinuses.  Removal of turbinated bones Removal of hypertrophic mucous membrane from inferior turbinated bone. For epistaxis	
Application of electric cautery	

Showing the Surgical operations performed in the State-Public, Local Fund, and Private-aided hospitals and dispensaries of Burma during the year 1919—continued.

	and dispensaries	of Bur	ma di	iring i	the ye	ar 191	19—co	ntinue	d.			
Class of		f patients from	tions	er of op perforing the y	ned ear.	of patients of on in 4 to 6.	Resi	ılt of op patie	nts.	s on	patients at the e year.	
operation.	Nature of Operation.	Number of remaining last year.	Prin- cipal.	Secon- dary.	Total.	Number operated columns		lieved.	Dis- charg- ed other- wise,	Died.	Number of remaining close of the	Remarks.
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)
Operations on the Naso-	Removal of adenoid growth Removal of nasal or naso-pharyngeal growths—  (a) through palate		69	•••	69 3	69	69	***	•••	•••	•••	
pharynx.	(b) through nose Suppuriation antrum of high-more.		Ι.	••••	1	ı	1		•••			
	Total	•••	73		73	<b>7</b> 3	73	•••	•••	•	•••	
Operations on the ear and accessory	For auricular fissure Removal of polypus Removal of foreign bodies For acute suppurative otitis media—		6 7		6 7 	6 7	6 7	•••	•••	•••	•••	,
cavities.	(a) Perforation of membra na-tympani. (b) Opening of mastoid			···		18	17	····				
	For chronic suppurative otitis	s	5		5	5	5	•••				*
	media. Total		36	1	37	36	35	1	•••			
Operations on	Laryngotomy		4	r	5	. 4	2	•••		2		
the larynx and trachea.	Tracheotomy		6		6	6	5			ı		
	Total		10	I	11	10	7	•••	• 4	3		
Operations on	Passage of an æsophagea bougie.	ı	ı		I	1	1	•••				
the phar- ynx and œsophagus.	Dilation of stricture of ceso phagus. Oesophagotomy		. I		1			•••				
	Total	.	4	-	4	4	3	-		1	-	•
Operations or thyroid body	Removal of gland		3	-	3	3			I			
Operations on the breast.	For cyst or benign tumour Excision of breast			• • •	3 22 17	22	24		·		2	
ħ	· Total		42	•	42	42	41		1	1	2	•
0	Paracentesis of pleura Thoracotomy Incision and drainage of pulmor	. 2	27 10	I	II	IC	) 9			1 2	I	
Operations on the thorax.	ary cavities. Exploration of lung Exploration of pleura Thoracoplasty	. 2			•••	•••	2 I	1	•••		***	
	Total	. 5	45	15	60	45	44		•	4	2	
		3	220	34	254	220	112	100	3	2	6	
Operations on the	(c) Exploratory	2	68 42	2	68	42	24	I		18	3	
abdomen.	Gastrorrhaphy Gastrostomy Gastro-jejunostomy Operations on the intestines—	I	3		4		2 1	•••	•••	1	•••	
	Énterorrhaphy	• • • • • • • • • • • • • • • • • • • •	4	•••	4	4	2	•••	•••	2	1	

	7	patients rom last	tions	er of or s perform	ned ear.	patients n in to 6.	Res		peration ents.	ns on	patients at the year.	
Class of operation.	Nature of operation.	Number of patients remaining from last year.	Prin- cipal.	Secon- dary.	Total.	Number of patients operated on in columns 4 to 6.	Cured.	Re- lieved.	Dis- charg- ed other- wise.	Died.	Number of remaining close of the	Remarks.
£ (1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)
Operations on the abdomen— concld.	Excision of portions of intestine-  (a) Enterectomy  (b) Colectomy  Colotomy (iliac)  Lateral anastomosis  For intestinal obstruction  Operations for disease of the vermiform appendix.  (a) Excision of the appendix.  Opening and drainage of abscess with removal of appendix.  Appendicostomy  Operations for external hernia-  (a) For strangulation  (b) For radical cure  (c) Reduction by taxis  Omentoplaxy  Operations on the liver  For cirrhosis  For abscess  For hydatidcyst  Operations on the gall bladder and bile ducts—  Cholecystotomy  Operations on the kidney—  Nephrectomy  Nephrectomy  For hydatidcyst  Operations on the kidney—  Nephrectomy  For hydatidcyst  For hydatidcyst  Operations on the hydroneph rosis—  For hydatidcyst  For hydatidcyst	6 5 4 4 7	2 I I 2 I 1 2 I 2 I 2 I 2 I 2 I 2 I 2 I		2 1 1 2 12 2 20 19 53 206 9 2 52 1	2 I I 2 I O 2 I O 2 I O 1 O 1 O I O I O I O I O I O I O I O	1 2 7 19 14 42 197 28 1	1 1 		10 1 12 2 1	      	
Operations on {     spleen.	Total Splenectomy Other operations on spleen		732	45	777 2 I	73 <sup>2</sup>	523		7	82	32	
spiecii. (	Total		3	•••	3	3	3					
4	•	-									•••	
Operations on the rec-{ tum and anus.	For anal fissure or ulcer For hæmorrhoids— For polypus For prolapse For non-malignant stricture Dilation of sphincter Excision of rectum-partial	I	1 101 8 157  8 3 1		8 157  8 3 1 1	8 157  8 3 1 t	97 9 149  7  18	 1 3 	···	 1  4	3  7 	•
	Total	2	302	•••	302	302	382	5	I	6	10	
[	Cystoscopy							•••	• • •		••‹	
Operations on the bladder.	(2) Puncture	4 1 2 1 1 1	34 14 35 2	I I	35 14 3 5 2	34 14 3 5 2	3 27 11 3 6		•••	6 1 1	3 2	
	Total .	. 9	71	2	73	71	63	I	• • •	11	*5	,
Operations on the prostate.	Supra-pubic prostatectomy					•••	•••	• • •	•••			

	and dispensaries	ojBi	urma (	aurin <sub>į</sub> —	g the y		919—0	ontini	iea.		. (0. 0)	
Ch		patients from	tions	ber of o perfo ng the	rmed	patients on in to 6.	Resu		eration ents.	s on	t patients at the e year.	
Class of operation.	Nature of operation.	Number of patients remaining from last year.	Prin-	Secon-	Total.	Number of operated columns 4	Cured.	Re- lieved.	Dis- charg- ed other-	Died	Number of premaining close of the	Remarks.
(1)	(2)	(3)	(4)	(5 <b>)</b>	(6)	(7)	(8)	(9)	wise.	(11)	(12)	(13)
			1	1			1	1				
	Passing of a catheter or sound Suture of ruptured urethra Dilation of stricture Urethrotomy—	•••	3	3	3 140	3 137	3 126	4	•••	2	5	
Operations	External	•••	10	•••	10	10	9	•••			I	
on the ure- thra.	Perineal section Operation for extravasation of	•••	3 6		3 6	3 6	3 3	•••	••.		•••	
	urine.			***				***		3	***	
{	Urethral fistula Removal of calculus or foreign bodies.	2	37	•••	37	37	39		•••			
	Total	3	212	3	215	212	199	5		5	6	
ſ	Circumcision Amputation of penis, partial or complete.	11	301 33		302	301	305	ĭ	•••		6	
	For phimosis	11	1,021	•••	1,021	1,021	1,002	14		ı	15	
	For paraphimosis For displaced or undescended		102	•••	102	102	180		•••		1	
	testis. For varicocele		7	•••	7	7	7				•••	
Operations	For hydrocele—					1						
on the male generative organs.	Tapping with injection Tapping without injection Radical cure	Λ.	8 148 637	4	8 152 637	8 148 637	5 53 616	3 95 1		1	23	
	For hæmatocele— Removal of testis Radical cure For elephantiasis scrotum Removal of testis for disease Hydrocele, incision and drain-	3 ••• •••	30 14 30 11	•••	30 14 30 11 3	30 14 30 11 3	25 13 27 10 3	3	I	5  I	3  I	
	age.	-	-									
	Total	30	2,426	5	2,431	2,426	2,278	118	ī	9	50	
	Operations involving abdominal section or puncture—									•		
	Paracentesis of ovarian cyst	1 7	18		26	18	8	11				
	Ovariotomy Oophorectomy	•••	42	•••	42	42	42	•••	• • • •	I	•••	
	Malignant tumour ovary Removal of uterine appendages—	_	3	•••	3	3	I	•••	•••	. 2	••	
	For salpingitis	•••	2	1	2		2	•••			•••	
	For hydro-salphinx	•••	9		9	I	9	•••	•••		•••	
	For extra-uterine { Ruptured gestation. { Unruptured	1	6		6	6	5.	•••	•••	1	•••	
Operations on the fe-	Removal of cyst in broad ligament.					•••	•••			•••	•••	
male gene- { rative or- gans.	Drainage of cyst or abscess in connection with uterine appendages.	-	2	I	3	. 2	2	***	.,.	•••	•••	
9	,									1		
	Abdominal hysterectomy—  (i) Supra-vaginal—  For fibroids  With removal of appendages.		35 13	•••	35		30		•••	5 3		
٠	(ii) Pan-hysterectomy— For cancer of uterus Removal of uterine fibroids		5	•••	5	- 1	4			ī	•••	
	Ventral fixation of uterus Removal of hymen	. 1	10		10	10	8	•••	•••	•••	2	

Showing the Surgical operations performed in the State-Public, Local Fund, and Private-aided hospitals and dispensaries of Burma during the year 1919—concluded.

Class of		patients rom last	tior	her of ons perfo	rmed	f patients on in to 6.	Resu	ult of or patie	peration	is on	patients at the	
operation.	Nature of operation.	Number of patients remaining from last year.	Prin-	Secon-	Total.	d d	Cured.	Re- lieved.	Dis- charg- ed other- wise.	Died.	Number of premaining close of the	Remarks.
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	<b>(</b> 9)	(10)	(11)	(12)	(13)
(	Operations by the vagina or vulva—										1	
	Removal of vaginal portion of cervix.	• • •	3°	•••	3	3	2		•••	•••	I	6
	Removal of polypus Replacement of inverted uterus	•••	3	•••	3	3	3	•••	•••	•••	•••	
	Curetting of uterus for cancer	2	107		108	107	103	4	•••	2		
	Endometritis abortion, etc. Dilatation of cervical canal		6			-	6			,		
17	Repair of lacerated cervix uteri			•••	6	6		100	•••	•••		
	Dilatation of hymen	•••	•••	•••	•••	•••	•••	•••			•••	
	For Retroversion of uterus replacement by pessery.	•••	***	•••	•••	•••	•••	•••	•••	•••	•••	
	For complete prolapse	•••	•••				•••	•••		•••	•••	
Operations	Removal of new growth of	•••	5	•••	5	5	5	•••	•••	•••	•••	
on the fe-	vagina. Dilatation of vagina for mal-		2	•••	2	2	I	I				
male gene-	formation.				•				•••	***	•••	
gans—con-	Canalisation of f imperforate vagina.	•••	ro	•••	ro	10	8	1		•••	1	
cluded.	Posterior colpotomy		•••	•••	•••	•••	•••		}			
	Colporrhaphy	•••		•••	•••	•••	•••		•••	•••		
	Drainage of pelvic abscess Evacuation of fluid collected	•••	4	•••	4	4	4	•••	•••	•••	•••	
	in pelvis. Repair of fistula into uterus or				•••					•••	•••	
	vagina— (a). Urinary		2		0	2	1		I			
	(b) Fæcal		I		2 1	1	•••			•••	•••	
	(c) With transplantation of ureters into rectum.	•••	•••	•••	•••	•••	•••		•••	•••		
	Repair of ruptured uterus				•••	•••	•••			()		
	Repair of perineum		5	•••	5	5	5			•••		
	Removal of hypertrophied labia and new growth.	•••	5	•••	5	5	5		•••	•••	•••	
Í	Removal of elephantoid labia		2		2	2	•••	2				
į	Plugging of vagina	. •••	•••	•••	•••		•••	•••		•••	•••	
	Total	4	315	10	325	315	279	20	I	15	4	
۱. ا	Not necessarily involving injury		3-8	•	3-3					-5		
	to mother or fœtus—						-0-					
	Application of forceps Version	I	191 36	I	192 36	1 <b>91</b> 36	187 34	1	•••	4	•••	
	Rectification of misplaced fœtal head.		5	•••	5	5	5		•••			
	Involving destruction of fœtus—											
	Craniotomy	••	34	•••	34	34	28	•••	1	5	•••	
	Cephalotripsy Decapitation	• • • •	1 2	•••	1 2	I 2	I 2	•••	•••	•••	•••	
	Eneleryotomy		•••	•••			•••			•••	•••	
Obstetric	Evisceration	•••	15		15	15	13	•••	•••	1	I	
operations.	Involving surgical injury to mother—					7						•
	Cæsarian section	1	3	•••	3	3	2	•••	•••	2		
	Other obstetric operations— Induction of premature labour			•••			•••	•••				
	Forced delivery	• • •	r	•••		1	1	•••		•••		
	Puncture of membrane	•••					· · ·	•••	•••	•••	•••	
	Delatation of cervix uteri Evacuation of uterus	3	8	•••	8	8	10	•••	•••	··· I	•••	
	Separation of placenta, partial	•••	31	•••	31	3 <b>r</b>	31	•••	•••			
	Separation and extraction of placenta and membrane	•••	31		31	_ 3 <b>1</b>	30	. 1		•••	•••	
	after delivery.											
	Plugging of cervix uteri Suture of ruptured perineum	•••	10		10	10	IO	• • •	•••	•••	1	
	Total	5	369	I	370	369	355	2	I	15	1	
	(1919)	457	52,544	586	53,130	52,544	51,264	975	78	306	378	
	GRAND TOTAL, { 1918 1917	457 3 <sup>8</sup> 5 548	50,814 55,655	794	51,608	50,814 55,655	49,490	911	80 131	350	457	

Showing the Income and Expenditure of the State-Public, Local Fund, and Private-aided hospitals and dispensaries of Burma during the year 1919

(Paragraph 22).

	•6	วนเ	S Closing bala	Rs.	6+8 2,230 461 41 340 283 199	161	878	471 266 190	3,095	:	:	1,361	120	383	678
	re.	nail	Total expend	Rs.	6,352 5,785 4,010 4,423 5,796	4,785	7,333	6,823 3,337 2,712	5,17,413	60,129	14,221	4,894	2,610	6,887	54,313
	-		Investments.	Rs.	:::::::	: 1		:::	:	÷	:	:	:	;	::
	•8	1	Buildings or	Rs.	733 453 453 175 260 708	795	186	619 329 313	33,481	11,485	1,147	1,038	161	574	30,854
	-	9	C.Miscellaneous	Rs.	7,652 .: 611 1,061 443 449 542	476	203 ISI	522 331 82	70,096	16,125	4,293	153	65	. 82	2,838
Expenditure.	-			Rs.	875 816 717 788 788 715	321	678	594 81 16	060,76	17,674	1,859	:	:	÷	4,433
Exper		ines.	EBazaar.	Rs.	2,324 321 577 139 248 264	115	96	486 55 70	2,701	209	I 20	219	304	153	30
	Modio	iviealcines.	European.	Rs.	7,363  7,82 533 4445 1,115	21	1,88 <sub>2</sub>	1,618 294 284	28,552	227	462	81	w	(9	3,584
		1	Inferior ser-	Rs.	8,796 1,118 1,256 1,223 1,152 1,152	1,260	2,793	1,529 906 597	39,700	1,541	360	1,341	702	2,201	6,556
	100	Salaries.	IN UTSES.	Rs.	2,018	12	: :	279	1,10,689	6,850	1,310	253	:	:	3,426
		0	Medical Officers.	Rs.	5,041 1,175 840 780 1,080 1,324	1,785	1,176	1,176 1,341 1,350	1,33,163	5,620	4,670	1,870	1,440	3,875	2,592
		'S	tqiədən letoT <u>z</u>	Rs.	18,925 2,230 6,713 5,826 4,350 4,705 5,995	4,976	8,211	7,294 3,603 2,902	5,20,507	60,129	· 14,22I	6,255	2,730	7,270	3,052
	9	re lude ies)	Miscellaneous (to incidential control of the contro	Rs.	2,690	es :	11 9	48 II	1,056	2,030	;	2 I	43	126	1,600
	rip-	-	. Svite	Rs.	640 62 257 268 222 175 160	132	25 I 63	311 85 19	00	2,	• 9	+34	:	, <b>:</b>	259
	Subscrip-	tions.	©European.	Rs.	54 19	88 :	129	128	34	:	:	181	:	:	19,603
91			investments.	Rs.	260 260 12 13 7	9 :	33	° :	1,047	:	:	134	73	9	152
Income.		pun	Municipal F contributions.	Rs.	32,822	: :	3,438	3,716	•	•		:	:	:	21,376
İ		uoɔ	Cributions.	Rs.	8,400 5,853 5,497 3,705 4,309 5,675	: :	1,000	900 1,367 1,049	:		:	:	:	:	5,380
	ment	ution.	ઈ Otherwise.	Rs.	3,000	1,469	3,250	1,500 485 313	2,07,350	46,118	7,881	1,367	. 460	811	
	Government	Contribution.	·Vislas eA 4	Rs.	:::::::	3,045	::	1,341 1,350	3,07,039	14,011	6,340	3,211	2,142	920,9	1,416
	-		SCash balance.	Rs.	302 1,908 419 21 404 214 152	233	1,099	671 393 171	162,1	:	:	406	83	251	5,205
			Name of dispensary.		Akyab Shwebya Maungdaw Buthidaung Kyauktaw Minbya Myohaung	Paletwa Paletwa (Itinerant)	Kyaukpyu Ramree	Sandoway Taungup Gwa	Kangoon General Hospital.	Rangoon Contagious Diseases Hospital	Rangoon Plague Hospital,	Kemmendine Dis-	Pazundaung Male	azundaung Female	Syriam Hospital Special Dispensary for Women.
		1	District. No.		AKYAB SS K	NORTHBRN PARAKAN.	KYAUK- K	Sandoway T	RANGOON	8	1.	<b>X</b>			S O

(b) Contribution from District Cess Funds.

	HANTHA- WADDY.	PRGU	Ряоми	THARRA-WADDY.	MA-UBIN	PTAPON	Myaung- mya.	BASSRIN	
	Kyauktan Twante Taikkyi Thongwa Hiègu Kungyangon	Pegu Nyaunglebin Kyauktaga Zaungtu Kawa Myitkyo (P.W.D.	Prome Paungde Shwedaung Paukkaung	Tharrawaddy M6nyo Th8nze Gyobingauk Zigôn Letpadan Minhla	Ma-ubin Pantanaw Danubyu Yandoon	Pyapon Kyaiklat Dedaye Bogale	Myaungmya Wakèma Mawlemyainggyun Einmè	Bassein Female Dispensary Bassein. Ngathainggyaung Kyaunggôn Kyônpyaw	
	:::::	· ::::::	::::	;;;;;;;	::::	:::::	• •	· · · · · · · · · · · · · · · · · · ·	
	300 300 304 304 158	7.10 476 134 3 69	486 278 132	177 178 178 178 178 178 178 178	108 320 504	798 251 169 816	773 359 314 147	195 195 557	1
		1,054	:::::	: : : : : :	::::::	* * * * * * * * * * * * * * * * * * *	: : : :	4,276	
	: : : : :	(a) 100 (a) 1,000 (a) 600 242	::::	: : : : : :	420	: : : :	I,000	350	-
	4,331 5,708 5,129 2,500 4,090 4,371	(b)1,000 6,235 3,861  3,016	550 1,400 1,400 2,753	14,945 2,521 800 1,000	2,180 4,820 2,000 2,000	4,200 3,800 10,062 8,926	5,705	1,000 4,247 3,837	
	3.336	M 5,67 A	21,351 '8,417 43.73	5,116 10,065 9,565 9,396 6,188	7,244  3,775, <b>4,99</b> 8	13,211	0,1072 9,101 6,882	35.626	-
	22000	37 23 . : : :	% r 4	: H W W W W	11 6	∞ v <sub>2</sub>	2000 +	: : : : : : : : : : : : : : : : : : :	-
	136	311 151 59	461 20 20 30	571  12 87	37	266	230	344 85	
	215 244 222 566 144 308	238 418 1149 	168 331 188	281 33 688 289 240 414 204	406 177 255 188	370 418 332 162	322 224 339 152	360 .:: 203 182 175	
	355	319 51 99 	1,479 36 3	3,3%	73	15 41 19 5	13	3,224	
	4,956 6,722 5,609 7,358 4,623 4,842	18,661 8,338 5,959 699 3,153 1,300	24,503 10,511 6,120 2,753	15,814 2,712 5,244 11,341 10,913 11,861 6,799	10,802 5,201 6,358 7,845	18,868 12,223 10,591 9,929	12,427 10,714 7,465 6,045	44,974 4,626 7,311 4,904 4,615	
	1,560 1,620 1,620 1,476 1,264 1,230	1,920 1,860 1,054  661 480	1,476	781 402 1,356 1,800 1,536 1,776 1,500	1,261 1,560 1,080 1,616	1,522 1,296 1,467 1,440	1,575 1,296 1,705 1,620	7,497 3,120 1,296 1,475 1,382	
	323 360 146 414 348	1,368 378 480 	1,385 892 	530 320 864 142	446 480 635 600	606 471	504 600 586 496	5,798  520 600	-
	624 994 1,608 939 594	4,373 2,060 1,353 454 369 124	6,024 2,177 1,774 615	3,340 247 1,060 3,343 1,908 2,790 2,098	3,558 1,428 1,753 2,413	5,469 2,106 1,858 1,557	3,325 1,547 1,090 666	1,156 1,267 1,267 1,267 1,191	-
	387 976 576 890 873	6,431 1,624 1,102 190 659 249	3,274 1,647 1,703 307	1,554 20 1,834 2,467 2,988 3,164 1,038	1,717 276 675 690	2,462 3,113 1,753 577	1,439 3,805 1,349 615	5,639 2,505 43 667	
	199 221 363 182 175 318	535 2844 186 176 176	833 619 123 104	719 85 220 768 194 194 411 363	385 176 1856	436 447 334 289	1,088 I	470 3 96 3 316 332	•
	568 452 353 172 277 429	2,180 921 540 	2,003 5	2,140 184 759 649 816 400	1,380 1 570 718 1,021	2,957 1 1,446 1		3,662 2 396 463 125	**
	424 428 33 <b>7</b> 948 566 707	1,325 609 419 52 328 328 298		3,118 3,128 3,10 3,10 3,10 3,10 3,10 3,10 3,10 3,10	1,143 370 489 753	2,594 1 019 1,634 2 736 3	) — but   but	25.2 25.2 707 508 332	2.78
٠	643 1,202 770 703 125 528	343 54 661 	4,367 1,563 394	3,470 1,581 248 618 1,123 879 486	5 <b>62</b> 66 538 100	642 468 3,482 3,702		237 237 388 388	
		1	2 01 10 2	1				4,60 6,44 6,00 6,455	
	6,365 6,365 6,393 4,267 4,679			15,652 2,613 5,212 11,076 10,771 10,535 1,3	10,452   4,926   2   6,044   376			70 I.	
	357 355 355 163	186 548 164 68 68	.794 266 194	162 99 265 142 142 185	350 275 314	683 345 217	733 402 378 100	215 346 548	

Showing the Income and Expenditure of the State-Public, Local Fund, and Private-aided hospitals and dispensaries of Burma during the year 1919-contd. STATEMENT H.

						Inc	Income,								Expt	Expenditure						Mary .
	,		Gove	Government Contribution,	-udintno	-uoo pui		Subscrip- tions.		to sins		Š	Salaries.		Medicines	nes.		charges.	.epsirs.	•	ture.	.93
District.	Name of dispensary.	SCash balance	As salary.	Otherwise.	Docal Fund	Municipal Fustions.	Interest on Sinvestments.	©European.	3 Native.	Miscellaneous (to include securities).	estgiscer letoT 🗒	Medical S. Officers.	ZNurses.	La l'aferior sere	European.	Bazaar.	To let.	euoansilaasi M 🕃	To egnibling 8	La Investments.	2 Total expend	Closing balan
1		Rs.	Rs.	Rs.	Rs.	Rs.	Rs.	Rs.	Rs.	Rs.	Rs.	Rs.	Rs.	Rs.	Rs.	Rs.	Rs.	Rs.	Rs.	Rs.	Rs.	Rs.
HRNZADA	Henzada Myanaung Lemyethna Ingabu Kyangin Zalun Kanaung	153 177 177 171 171	: : : : : : : :	: <b>: :</b> ; : : :	(b)2,900 (b)1,500 4,371 5,009 	14,940 5,116  4,692	चित्रच H	317 50 11 	452 328 132 1117 1113 45	5560 20 30 4 :	19,629 7,044 1,691 5,345 5,264 3,663 1,746	2,156 1,845 1,546 1,667 1,680 1,770	1,965 104 480 480 59 143	5,298 1,538 6,66 6,32 1,104 853 558	3,500 1,372 652 1,017 497 459 309	754 1 303 183 201 370 110	153 1888 193 190 190 190 190 190 190 190 190 190 190	403 403 417 963 493 224 106	839 209 462 452 45 143		8,603 I, 6,872 4,606 5,130 4,760 3,595 I,574	172 85 215 504 172
MOULHEIN	Moulmein Female Dispensary	1,509	060'1	II3	(6)7,400	43,596	::	1,502	636 2	2,011	55,654	6,814		490	4,536   1	,458 I	1,251 5	5,943 4	4,931	::: 	3,676 1	978
	Amherst Ye Kawkareik	350 483	° : :	:::	3,315 3,159 4,086	: : :	# 0:00 H	273	130 249 234	333	4,276 3,800 4,859	1,081 1,113 1,716	463 393	632 494 1,485	28 312 373	209 86 103	341 73 316	621 769 320	302	:::	3,677 3,318 4,401	4 582 4 582 4 583
TAVOY	Tavoy	. 83	:	3,000	:	38,571	က	453	381	102	12,593	:	12,709	204	542 2	1,281	3,051	617 4	4,108	.:	2,512	81
Margui	Mergui Victoria Point Palaw	316 2,402 389	: : :	(a)1,200	3,710	11,273	55	365	308 I	1,130 866 3	73,398 8,315 3,990	1,764 2,100 918	1,064	3,141	1,405 594 512	481 2 206 I	316	,410 728 387	525 460 180	:::	2,219 1, 6,530 1, 3,431	1,179 1,785 559
Tourgoo	Toungoo Shwegyin Pyu Thandaung		::::	(a)1,500 (a) 150	3,360 5,440 	46,079	900	53 187 76	21 7 143 143 1 323	7,682 1,079 10 9	59,753 7,450 7,984 3,046	2,362 120 1,740 1,620	1,933 170 	7,107 4 2,426 1,806 1	1,107 I 1,211 1,369 232	,220 158 391 27	5,256 I 1,012 883	3,091 1 570 859 127	7,672 323 687 184		52,748 7, 5,989 1, 7,735 2,886	7,005 · 1,461 · 249 · 160 · 16
Тнатом	Thatôn Kyaikto	654	:::	: : :	2,000 I,000 4,766	14,105	30	190	481 463 152	540	5,248	1,695	839 586 430	3,674 3 1,376 1	3,058	298 I. 143 97	386 168 171	338 786 413	3,270 627 2 <b>8</b> 2		6,558 6,073 5,089	918 347 159
SALWERN	Papun	232	7,695	770	*5** >*	:	:	350	270	6	8.52.6	5,258	156	2,437	66	97	392	322	300	<u>~</u> *	9,010	232

MANDALAY	Внамо	×	KATHA	RUBY MINES	SAGAING S
Allanmyo Minhla Minhla Mindôn Mandalay Shore Mandalay Town Mandalay Female	Mar Mar	Myitkyina Sadôn Sima Sima Sinbo Mogaung Kamaing Lôntôn Family Lines	Putao  Katha  Mohnyim  Wuntho Banmauk Pinlèbu  Mansi  Tigyaing	Mog8k Thabeitkyin Momeik Shwebo Ye-u Kanbalu	Sagaing Chaung-u Myinmu Myotha
350 350 350 200 200 300 300 300 300 300 300 300 30	0,2 0,2 0,2 0,2 0,0 0,0 0,0 0,0 0,0 0,0	216 216 177 177 543 543	397	434 80 328 328 784 572	837 291 188
· : \$ : : : : : : : : : : : : : : : : :	1,634 3,804 3,727 421 677 431		6,208 3,677 1,320 2,122 906 3,46 1,688 2,036	3,504 120 600 1,260 1,690 405	
(a)1,850  1,409 	(a) (a)		6,491 339 339 761 454 454 337 337	4,876 620 812 812 (a)1,000 2,309	(a)4,300 1,075 991 1,159
3,137	:::::::::::::::::::::::::::::::::::::::		: :::::::::::::::::::::::::::::::::::::	120	
5,855  1,05,148 3,077 3,349	3,107			13,403	8,307
0 m m m : : :		0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	o o ino 4	0 H 0 42 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	50 : : :
30	80 : 80 : : : 30 : : : : 30 : : : : : : : : :	25. 4. 4. 4. 4. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5.	38 :: : : : : : : : : : : : : : : : : :	796 77 14 180 280	381 57
319 111 50 397	104 360 360 96 75 	468 19 23 277 183 193 193	147 248  101 80 75	508 100 155 396 512 87	336 86 83 146
169 179 21,806	17 7,679  15 20	336 15 15 141 141 53	31 100 H 100	54  60 333 21 1	161
6,569 3,413 3,413 1,31,252 3,077 3,349	3,218 63,912 3,107 15,419 3,959 1,214 962 651	17,585 3,207 2,233 3,715 6,653 3,026 1,357	13,444 7,349 1,706 3,196 1,664 919 2,015 2,273	10,308 928 1,979 17,470 5,123 1,042	16,562 3,070 4,513 3,413
1,176 1,176 1,193 1,193 1,296 1,296 1,296		H	2,841 900 960 1,560 1,20 1,105 1,353	1,984 120 120 120 1,440 1,380 405	2,220 1,308 2,066 1,500
375 375 33,748	1,490 585 	726	783	317	1,803
22,467 768 22,467 798 846 846	304 (3,53 <b>0</b> 617 2,571 1,156 301 301 301	1,462 393 465 	3,367 2,066 3,502 3,502 8,10 2,06 2,06 5,83 6,83	3,312 302 480 4,1+7 310 82	4,168 309 1,124 227
1,320 471 453 11,963 481 497	8,311  477 49 		127 200 118 66 66	282  500 2,975 1,4	2,840
2,03 1,00 1,00 1,00 1,00 1,00 1,00 1,00 1	2,061 33 376 106 20 18 18 18		101 303 303 44 44 44 68 68 68 68 123	334 655 27 242 242 265	643 110 188 188 127
574 169 195 35,544	9,462 528 348 141 141 411 545 548 548 548 548 548 548 548 548 548	5,428 311 137 390 773 318 318 15 	1,297 1,190 294 296 90	1,535 68 68 111 111 1,825 515 3	2,222 51 152 80
564 659 206 17,162 259 563 974	6		2,474 981 112 240 247 133 204 79	1,277 196 332 3,779 1,779 1,292 30	1,568 859 290 951
8,371 	353 353 333 333 300 200		2,590 698 158 355 249 141 141 35	1,024 115 201 2,617 1,054	380 140 481 108
		: : : : : : : : : : : : : : : : : : : :	0	#194	::::
6,207 3,138 1,27,756 3,077 3,349 4,742	2,905 62,386 3,107 9,273 3,727 1,014 869 586	17,054 2,086 2,086 1,994 3,571 6,389 2,756 1,028	7,121 1,659 3,109 1,542 739 2,015 2,273	10,065 866 1,771 16,876 4,807	15,844 2,781 4,315 3,024
362	313 11,526 11,526 232 232 200 93 655		_		

(e) Contribution from Provincial Funds.

. Showing the Income and Expenditure of the State-Public, Local Fund, and Private-aided hospitals and dispensaries of Burma during the year 1919—concld. STATEMENT H.

	·9	oneled gnieolo &	Rs.	1,837	33 109 109 103 102 292	383 475 322 721	1,715 249 298 186	241 253 411 1,377	225
	ure.	2 Total expendit	Rs.	11,228  3,595	4,728 4,345 3,467 4,187 3,487 2,236 1,130	10,:09 3,282 3,164 3,574	6,324 10,565 4,862 1,609	0,456 7,007 468 904 2,379	9,574 2,850
	Name and the first of the special section of	Investments.	Rs.	:::	: : : : : : :	: : : : :	: : : :	: : : : :	::
	.srieq	er 10 sgnibling g	Rs.	101,1	540 695 695 1,151 540	459	216 67	137 634 	608 21
	charges.	euoansllaasiM 💆	Rs.	1,083	2,693  1,513 992 1,234 1,095 550	1,197 579 331 456 80	790 1,896 455 507	575 536 38 334 163	1,214
Expenditure.		.jDiet.	Rs.	945	85 14 75 67 133 21 13	800 101 200 106 40	853 2,645 165 9	1,296 252	1,713
Expe	Medicines.	E Bazaar.	<b>\$</b>	435 36	93 44 43 51 25	353 160 127 30	142 787 59 34	485 276 16 17 111	572
	Medi	European.	Rs.	3,425	49 85 17 30 30 13	I,882  IO 52	1,288 150 828 25	3,333 2,032 1,8 1,8 1,8	1,638
		-Inferior ser-	Rs.	3,139  432	1,615 282 446 452 373 398 405	3,125 713 773 1,213	2,337 1,488 1,488	2,664 1,742 276 372 938	2,449
	Salaries.	Z. Sasın V 🚉	Rs.	.:::	:::::::::	L,012	131	326	::
		≘ Medical Offi-	Rs.	2,100	1,237 1,195 1,195 1,210 1,158	1,281 1,830 1,690 1,620	1,314 2,750 1,800 851	1,440 1,545 120 120 120	1,380 1,320
		Total receipts.	Rs.	13,065	84,956 . 4,454 3,486 4,251 3,520 2,338 1,412	10,492 3,757 3,196 4,295 270	8,039 10,814 5,160 1,795	10,697 7,260 879 2,481 2,503	.10,240 3,0 <b>7</b> 5
	ergieser do estas	Miscellaneous (to include securities).	Rs.	44	37 37 6	1,083	17	135	503
		S Native.	Rs.	659	114 125 52 164 75 101 43	75 72 101 190	499 298 137 66	242 237 131 243 193	156
	Subscrip- tions.	© European.	Rs.	499	331 85  11 11	296  82 273	249 850 43	238	198
		Interest on sinvestments.	Rs.	:: ‡	<u>н н</u> н+	41 41 41 41 41 41	1 :88	0 7 7 4 0 4 I	24
Income.	-uo pu	Suributions.	Rs.	5,625	::::::::	7,600	2,712	5,132	7,545
	-udinta	Clocal Fund of	Rs.	:::		:::::	6,447		: :
	ment ution.	O.Otherwise.	Rs.	(a)3,000	81,480 3,205 1,715 2,374 1,860 1,080 580	(a) 500 · 651 504 272 150	2,515	(a)1,600 (a) 300 320 320 225	(a) 240 589
	Government Contribution.	· Yralas 2A 4	Rs.	1,740	2,828 1,990 1,641 1,662 1,531 1,062 505	1,419 2,543 2,463 1,997 120	3,292 3,023 1,500 993	1,440 1,425 300 464 2,051	2,087
		esoneled des J &	Rs.	1,498	169 44 47 47 36 85 215	570 477 459 	1,466 181 281 172	183 81 81 1,414 33	934 149
		sary.			:::::::	: : : : :		:::::	::
		Name of dispensary.	·	Månywa Yinmabin Kani	Mawlaik Kindat Mingin Paungbyin Homalin Kalewa Kalemyo	Pakôkku Pauk Gangaw Yenangyat Kanpetlet	Magwe Yenangyaung Taungdwingyi Sale	Minbu Salin Sinbyugyun Sagu Pwinbyu	Kyaukse Myittha
		District.		Lower CHINDWIN.	UPPER CHINDWIN.	Ракокки		MINBU	Kvauksè

364	47 <b>4</b> 951 275	685 407 106	793 880 340 	241 232 332 340 340	1925	73,440	76,087	88,961
9,407 1,053 4,859	8,725 12,646 4,738 864	17,587 5,615	9,055 8,391 2,131 3,802 3,802	12,120 1,575 1,424 1,575 2,579 4,335 8,368	1,824 508 372 2,044	20,18,287	20,09,847	21.22,245
::::	:::;	:::	:::::::	: : : : : : : : : :	, : : : : :	6.586	18,166	1,772
::2::	1,448 1,846 265	482 140 71	00 : : : : :	1,963 196 135 3,993 82 1,149	361	2,39,517	2,85,325	2,86,896.1
3,496	597 1,371 354 370	4,511 1,025 214	2,335 1,560 254 254 93 629 306	1,254 390 312 495 269 397 1,240 151	516 195 80 146	2,34,362	2,11.691	8,79,960
1,245 14 394	867 423 239	3,006	2,150 2,081  64 	1,489 261 261 1,010 40 483 40 1,557	540 135 144 51	8,65,363	2,63,287	2,39.808
800 47 341	29 <b>5</b> 500 160	466 175 105	388 388 20 72 195 206	174 123 168 168 125 14	117 96 19 62 62 85	1	45,884	71,738
125	1,682 2,614 855	2,895 572	173 1440 1440 8 :: 8	25 25,440 3,047 1133	0.6.	2,44,152	8,11,716	3,00,688
1,578 380 1,495	2,776 2,258 1,125	5,175 1,319 536	2,599 2,179 1,80 666 1,121 1,007	2,200 543 480 966 1,173 1,364 2,004 1,945	3,216  955 1,294	3,58,544	8 ,75,049	3,64,088
063	H	872 300		1,052		9,17.286	1,89,993	2,30,981
1,500 519 1,780	3,185 1,740 375	180 1,740 1,058	1,170 1,842 110 983 120 1,842 1,314	3,892  120 1,959 1,071 1,690 30 1,034	1,065 59 120 830 1,107	3,93,924	4,14,897	3,96,3 8 0
9,771 1,258 5,053	9,199 13,597 5,013 864	18,272 6,022 2,139	9,848 9,271 2,471 2,471 4,65 4,810 3,244	13,36: 1,807 1,517 1,430 2,579 4,333 8,708 733	5,079 563 564 2,044	20,91,667	20,84,944	28,11,206
<b>≈</b> :∞ :	332	401	503	388	OI : : : :	62,059	39,817	8,88
285 152 ::	202 214 161	328	857 338 353 353	169 170 255 116 116	123 36 : : :	32,218	38.38	83,549 30
489	191 140 	#8I 	448	188 117 36 65 65 14:	408 : :	24,893	8,488 24,397 3	8,076 40,268   83 2,630
n <del>4</del> → :	:: 0:	26	. 4 : 0 : 8 · 8 · 8 · 8 · 8 · 8 · 8 · 8 · 8 · 8		∞ n <del>4</del>	8,862	2,987	3,077
	7,934 8,924 	15,496 4,150	:::::::			0.88,880	7,97,465	6,83,799
÷ : • :	3,479	: : :	718	1,409		8,49,875	8,75,026	9,49,946
5,110 147 1,356	405	(a) 1,000 (a) 411 414	4,364 5,298 234  165 (a) 405 (a) 456	2,836 796 604 7,322 279 3,408	1,460 395 1,85 259 365	4,99,438	4,09,519	5,47,312
3,741 899 3,275	3,120 1,152 458	752 1,594	3,581 2,182 300 1,378 2,798 (a) 660	7,544 663 600 2,244 3,054 4,211	3,216 59 1,78 <b>5</b> 2,401	4,66,527	4,85,973	5,17,466
110 164 143	540 659 a15	456 350 73	965 338  1,166	165 130 67 819 190 176	262 69 183	*76,062	86,00	*70,363 5,
	::::	:::		:::::::	* : : : :		; Em	
Meiktila Wundwin Thazi Mahlaing	Yamèthin Pyinmana Pyawbwa Lewe	Myingyan Pagan Kyaukpadaung	Lashio Hsipaw Kutkai Nawngkhio Tangyan Kyaukmè	Taunggyi Myelat Loikaw Loikaw Loilem Yawnghwe Bampôn Kalaw Loimwe Kēngtūng	Falam Tiddim Haka Tunzan Mindat-Sakan	GRAND TOTAL FOR 1918	GRAND TOTAL FOR 1917	GRAND TOTAL 1919
MEIKTILA	YAMBTHIN	MYINGYAN	NORTHERN SHAN STATES.	SOUTHERN SHAN STATES,	CHIN HILLS. PAKÓKKU HILLTRACTS		•	

\* Difference is due to the omission of Rs. 3,077 being the closing balance of Rathedaung, Tapun, Thayetkon, Bilin, Yinmabin and Kindat.

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STATEMENT J.

Account of Invested Capital of the Hospitals and Dispensaries of Burma during the year 1919
(Paragraph 22).

No.	Name of hospital or dispensary.	Balance on 1st January 1919.	Invested during the year.	Total.	Securities sold.	Deposits withdrawn.	Balance on 31st December 1919.
(1)	(2)	<sub>p</sub> (3)	(4)	(5)	(6)	(7)	(8)
		Rs.	Rs.	Rs.	Rs.	Rs.	Rs.
I	Shwebya	5,400		5,400			5,400
2	Rangoon General Hospital.	30,000	•••	30,000	•••	•••	30,000
3	Toungoo	6,000	•••	6,000			6,000
4	Kyaikto	1,500	***	1,500	•••	• • •	1,500
5	Lashio	4,000	•••	4,000	•••	•••	4,000
6	Akyab ·	1,500	•••	1,500	•••	••.	1,500
7	Kemmendine	2,000	•••	2,000	•:	•••	2,000
8	Twante	400	310	710	•••	• • •	710
9	Kawa	100	•••	100	***	•••	100
10	Myaungmya	1,000	•••	1,000		,•••	1,000
II	Einmè	500	***	500	•••	•••	500
12	Thayetkon	100	•••	100	•••	•••	100
13	Mergui	1,550	•••	1,550		•••	1,550
14	Papun	450	•••	450	•••	•••	450
15	Maymyo	2 <b>,0</b> 00	1,000	3,000	•••		3,000
16	Shwegu	200	*	200	•••	•••	200
17	Mogaung	100	•••	100	•••	•••	100
18	Pyinmana	500	•••	<b>50</b> 0			500
19	Kyaukmè	1,200	•••	1,200	••	•••	1,200
30	Rathedaung	200	•••	200	•••	•••	200
21	Putao	320	•••	320	•••	•••	320
22	Kawkareik	310	•••	310	•••	•••	310
23	Thatôn	400	•••	400		•••	400
24	Bhamo	400	•••	400	•••	•••	400
25 26	Hsipaw	2,000	•••	2,000	•••	•••	2,000
	Minhla	<b>8</b> o	62	142	•••	•••	142
27	Kanbalu	•••	400	400	•••	•••	400
	Total	62,210	1,772	63,982			63,982







# TRIENNIAL REPORT

ON THE

# HOSPITALS AND DISPENSARIES IN BURMA

FOR THE YEARS 1917 TO 1919



RANGOON

OFFICE OF THE SUPERINTENDENT, GOVERNMENT PRINTING, BURMA

1920



